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(54) **METHODS FOR TREATING A DISEASE
CAUSED BY CHOROIDAL
NEOVASCULARIZATION**

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(2013.01)
USPC **514/13.3**; 514/20.8; 514/21.6

(58) **Field of Classification Search**
None
See application file for complete search history.

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(57) **ABSTRACT**

The present invention provides novel pharmaceutical agents
and methods for treating or preventing diseases caused by
neovascularization in human choroid (neovascular macul-
opathy). The present invention provides pharmaceutical com-
positions and vaccines for treating and/or preventing diseases
caused by neovascularization in human choroid (neovascular
maculopathy), comprising at least one type each of a peptide
comprising an amino acid sequence derived from a VEGFR-1
protein and having an activity of inducing cytotoxic T cells,
and a peptide comprising an amino acid sequence derived
from a VEGFR-2 protein and having an activity of inducing
cytotoxic T cells.

22 Claims, 19 Drawing Sheets

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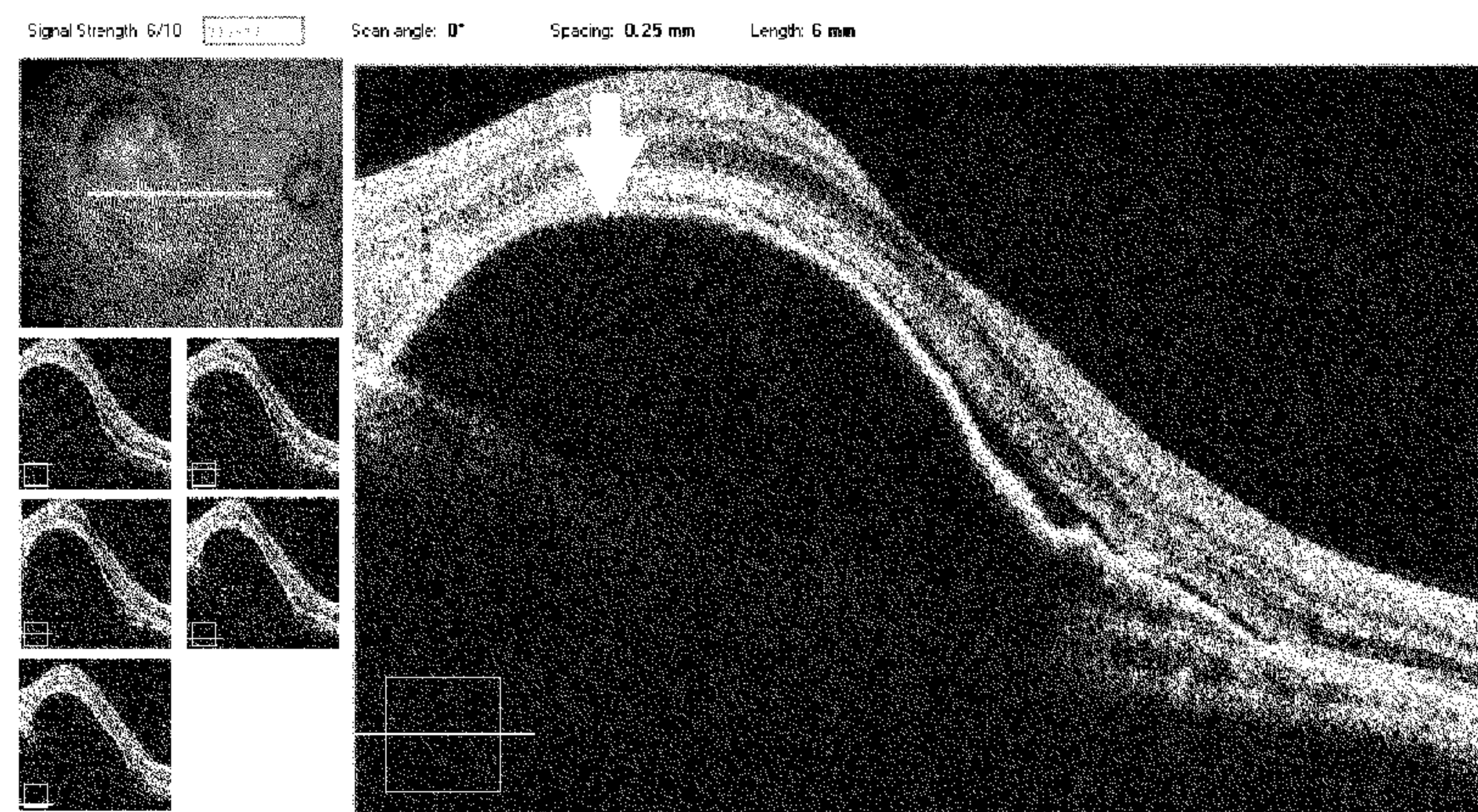
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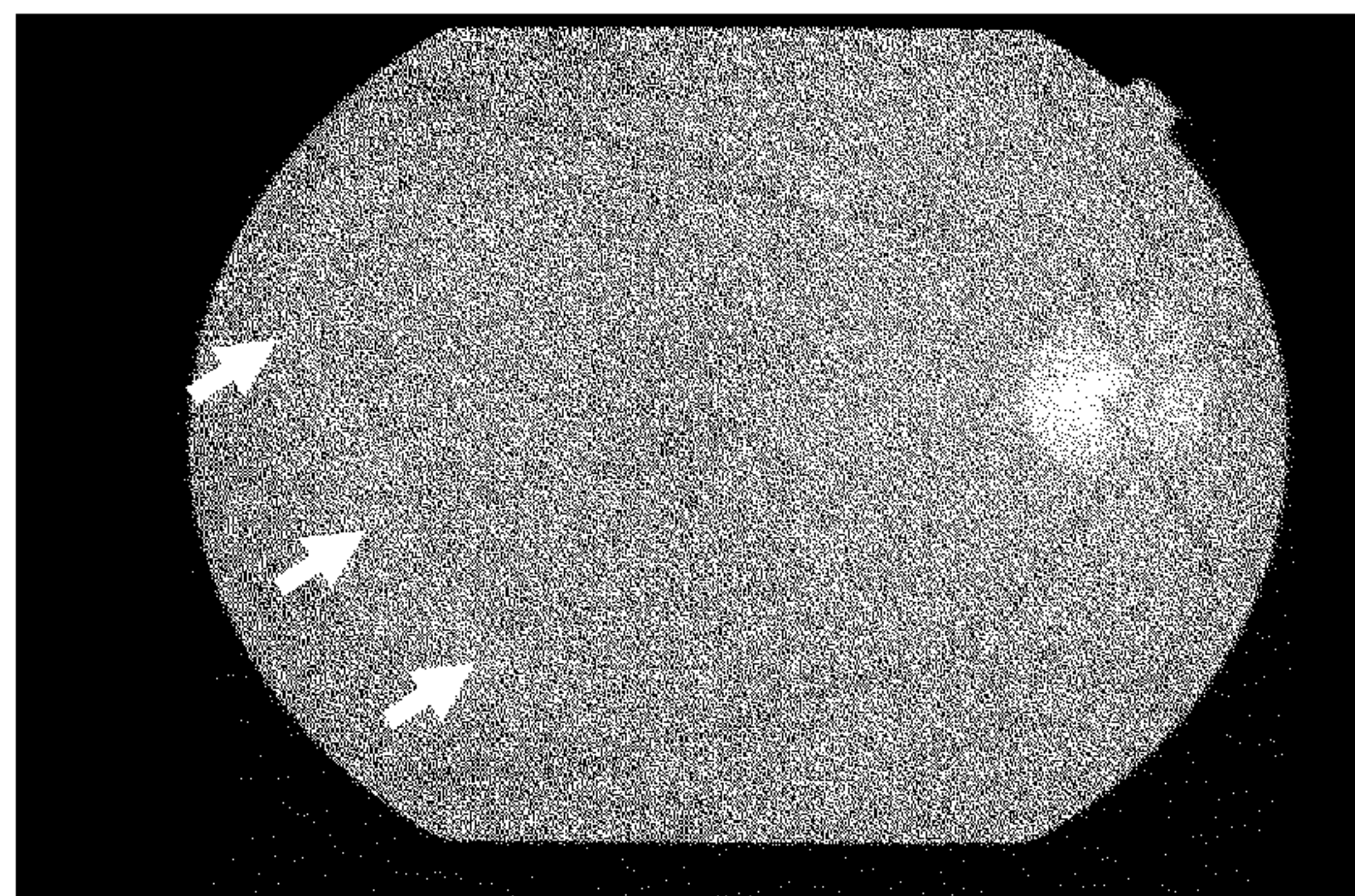
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Fig. 1-1
HLA-A0201-Case1 Pre-treatment

A



B



C

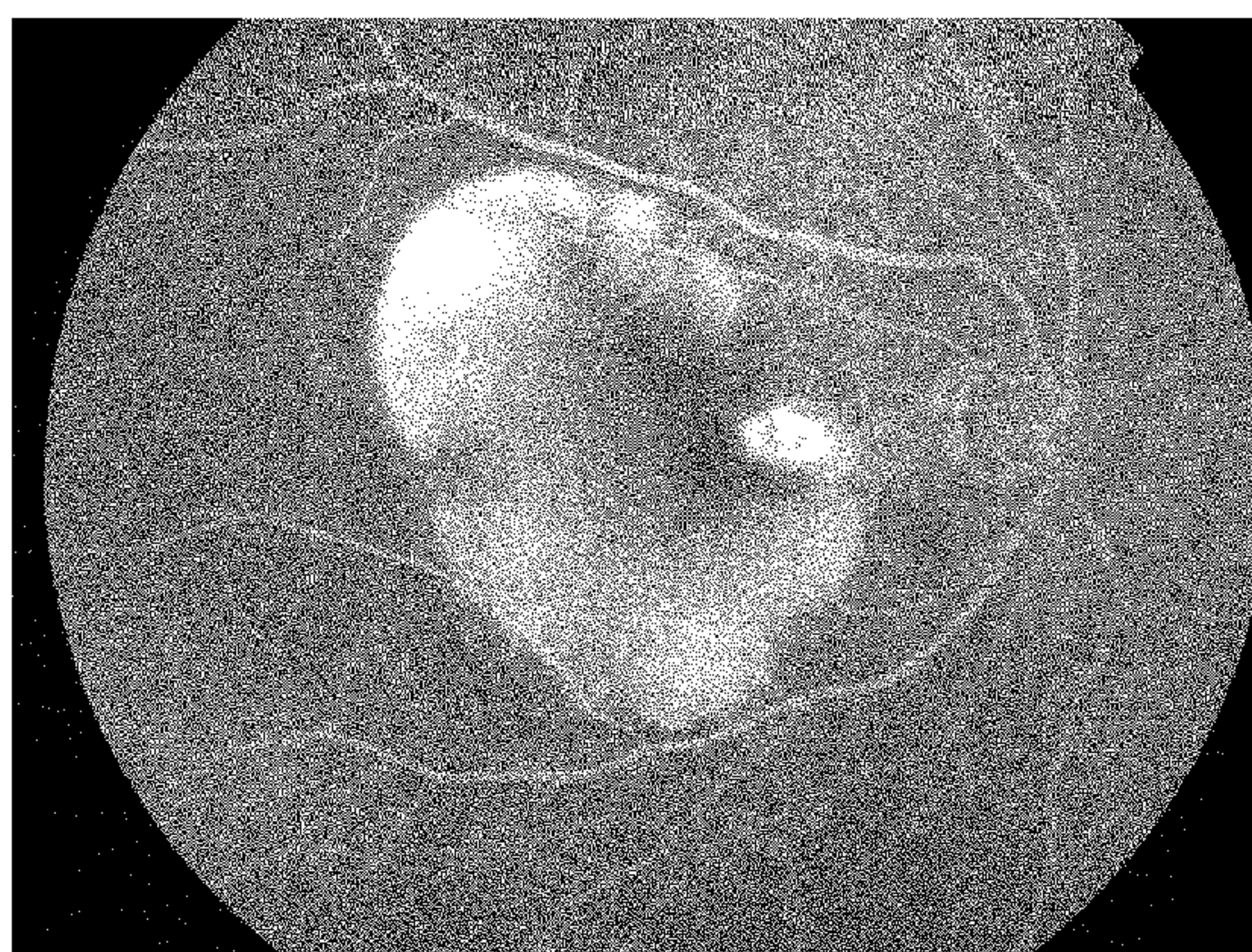
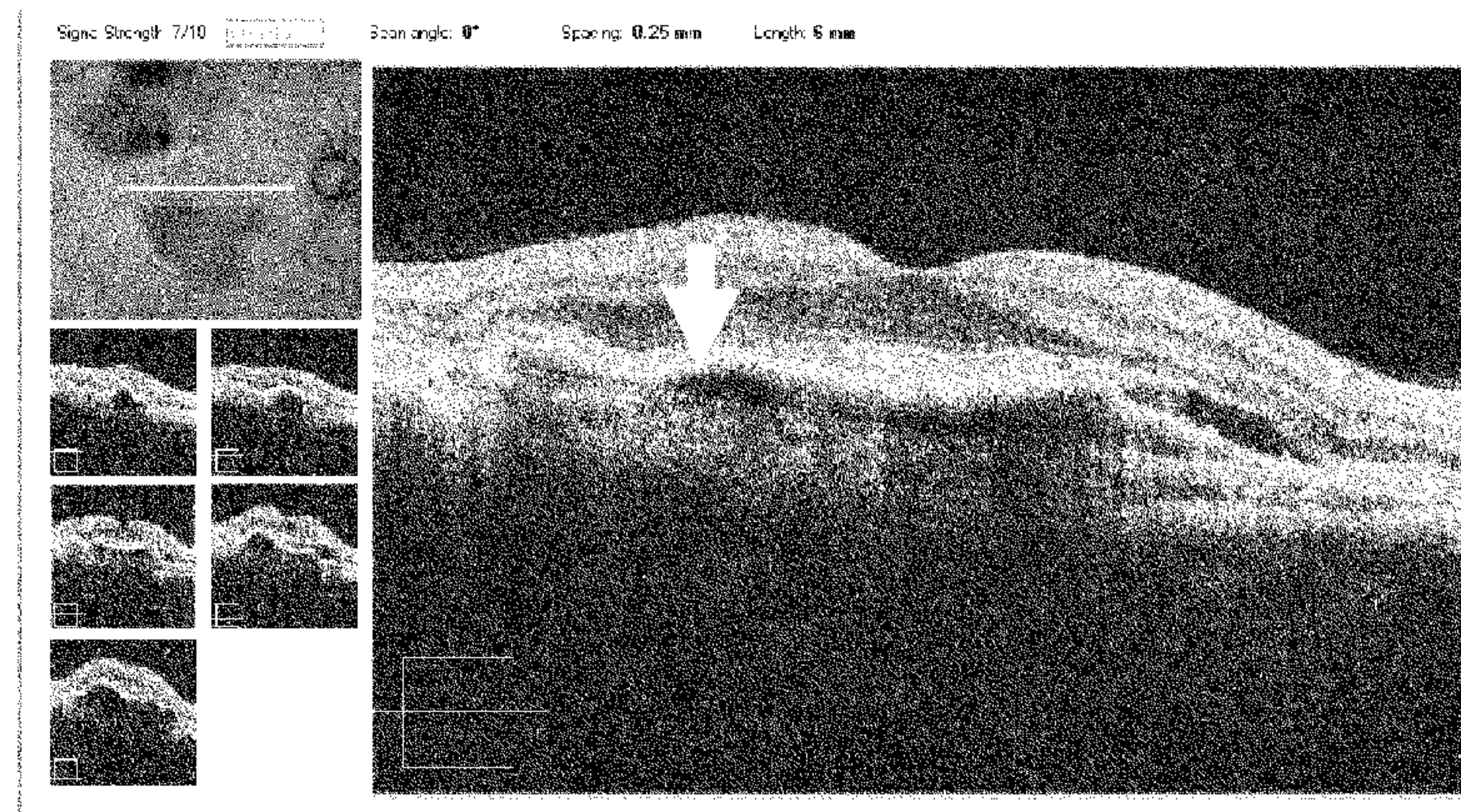
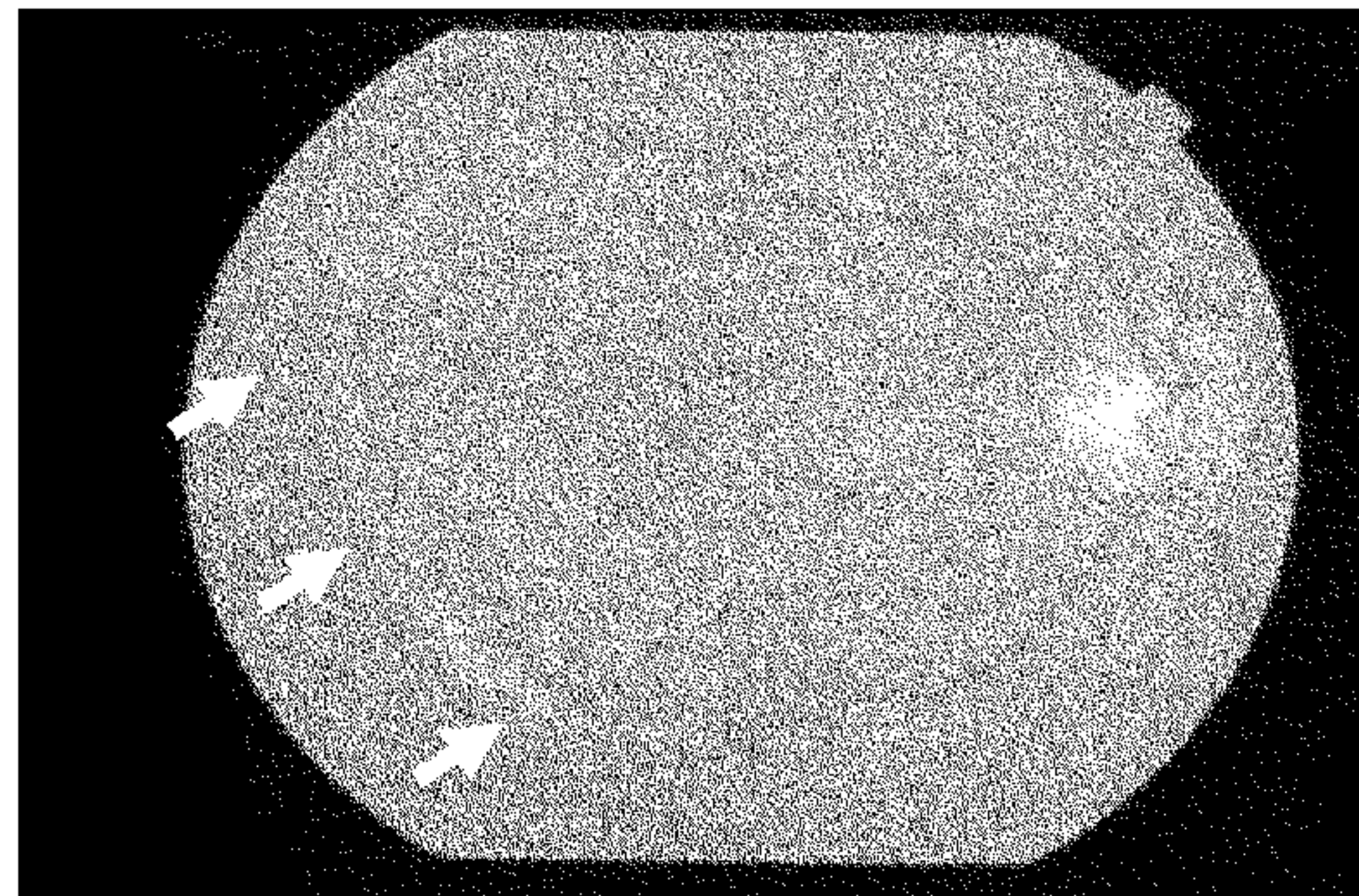


Fig. 1-2
HLA-A0201-Case1 5 months later after stating treatment

D



E



F

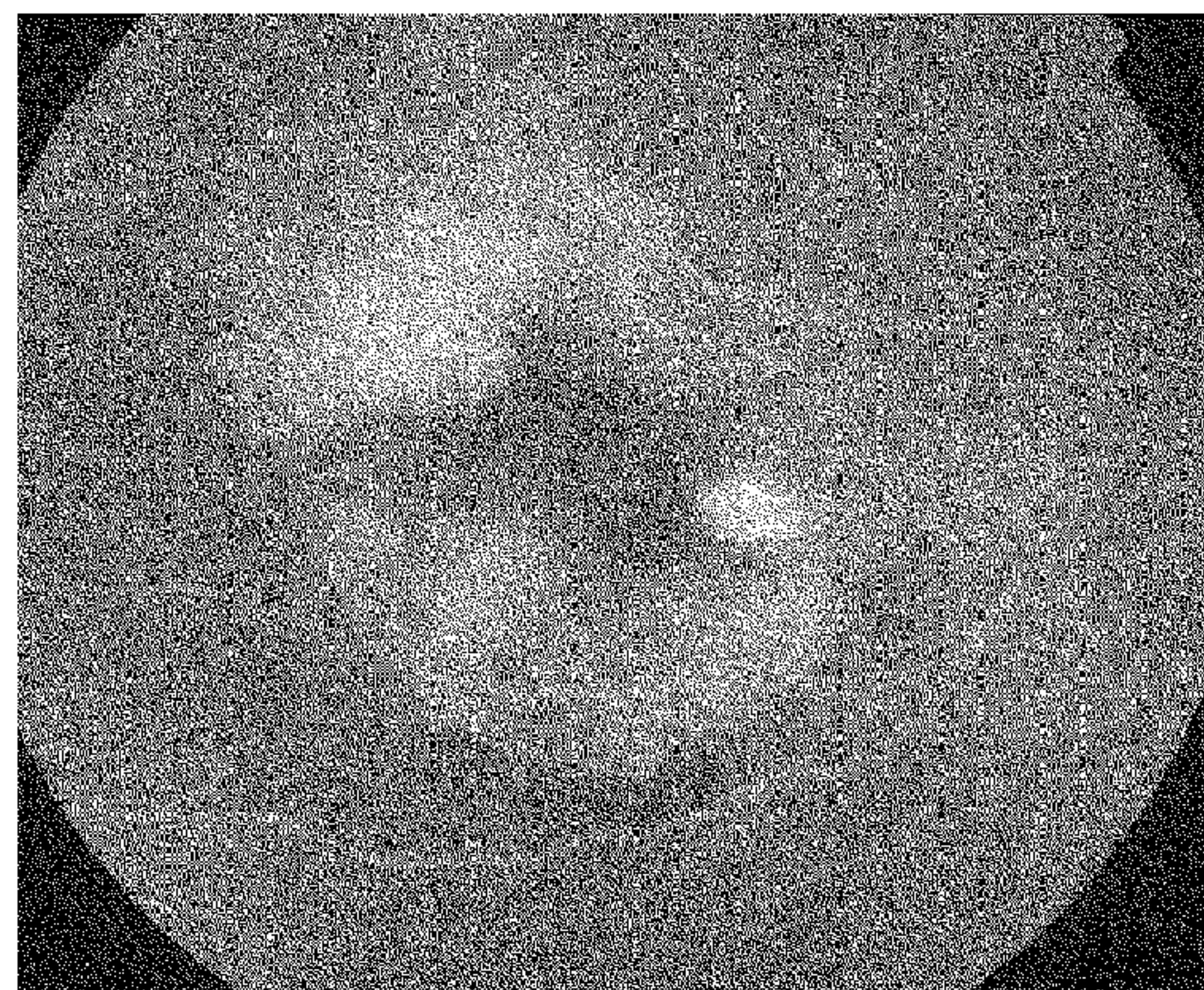
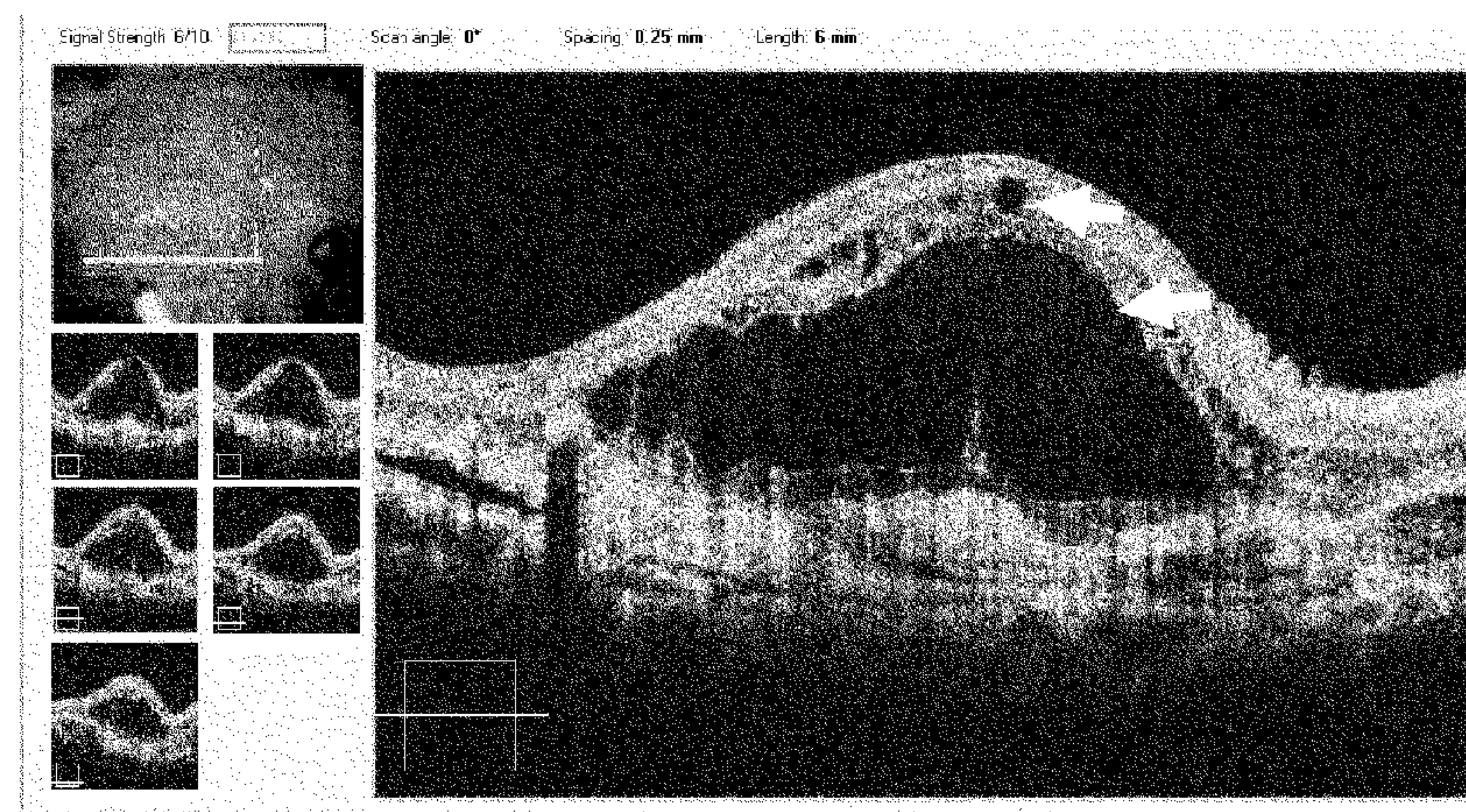


Fig. 2
HLA-A0201-Case3

A Pre-treatment



B One month later after treatment

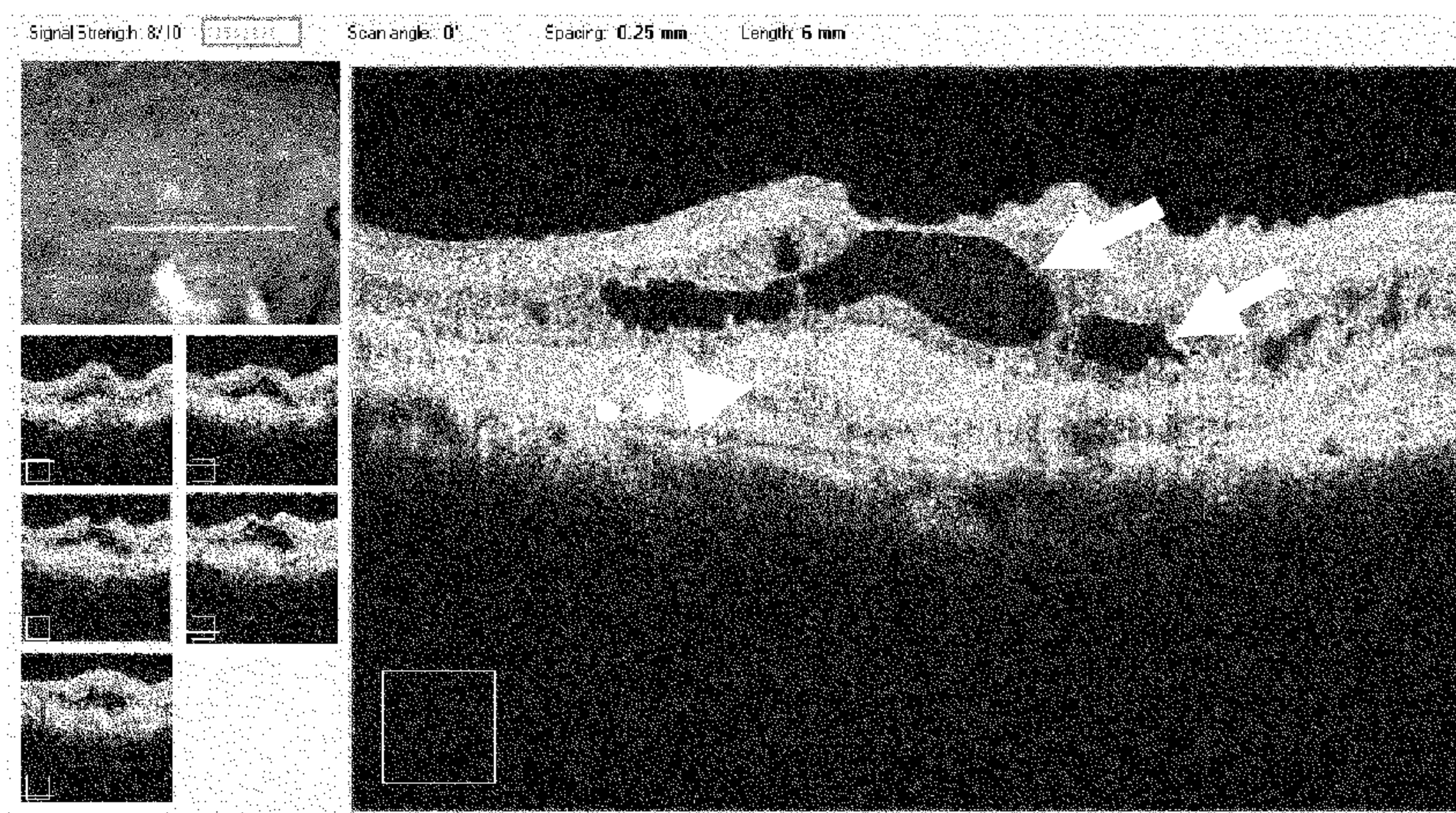


Fig. 3
HLA-A2402-Case1

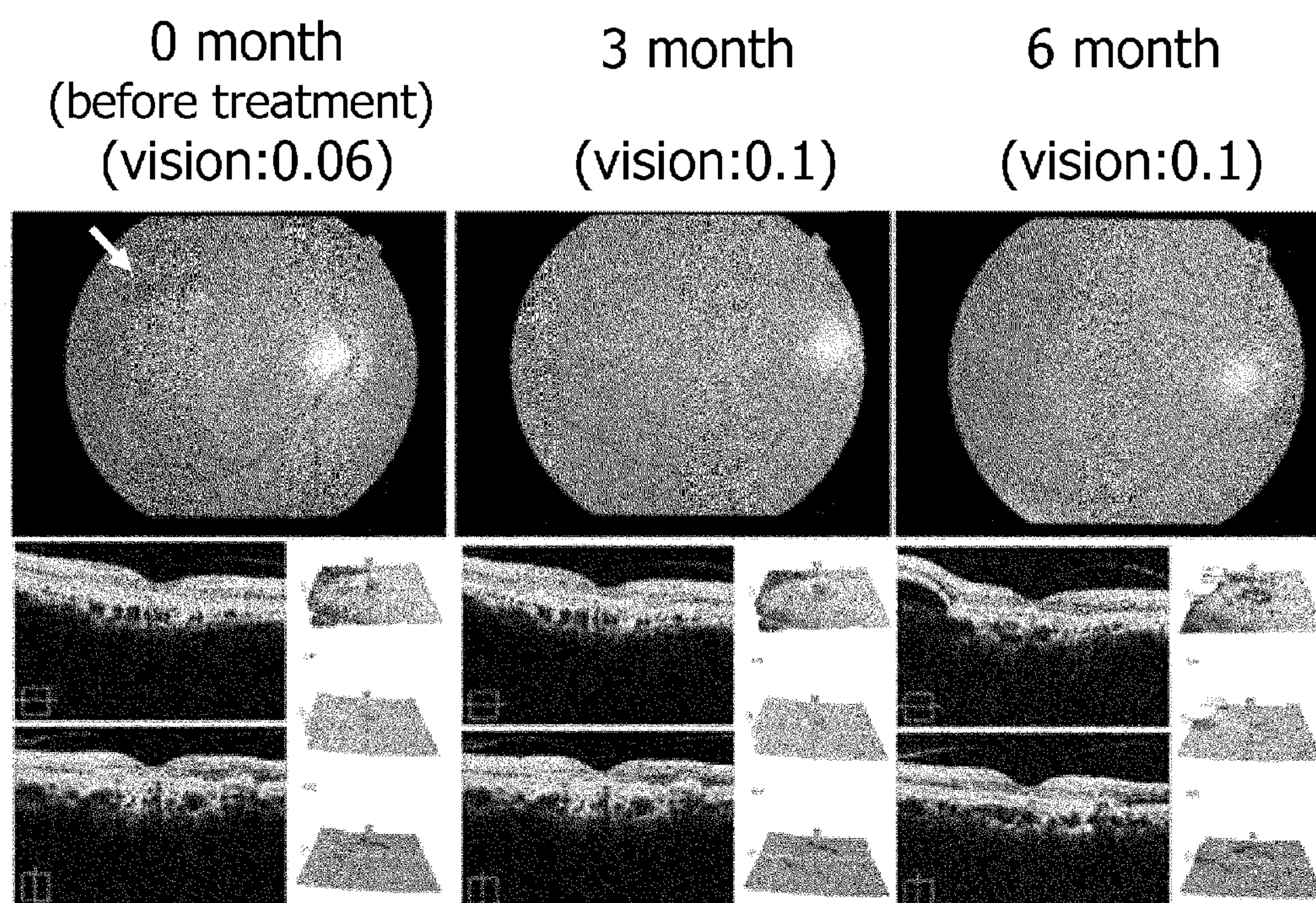
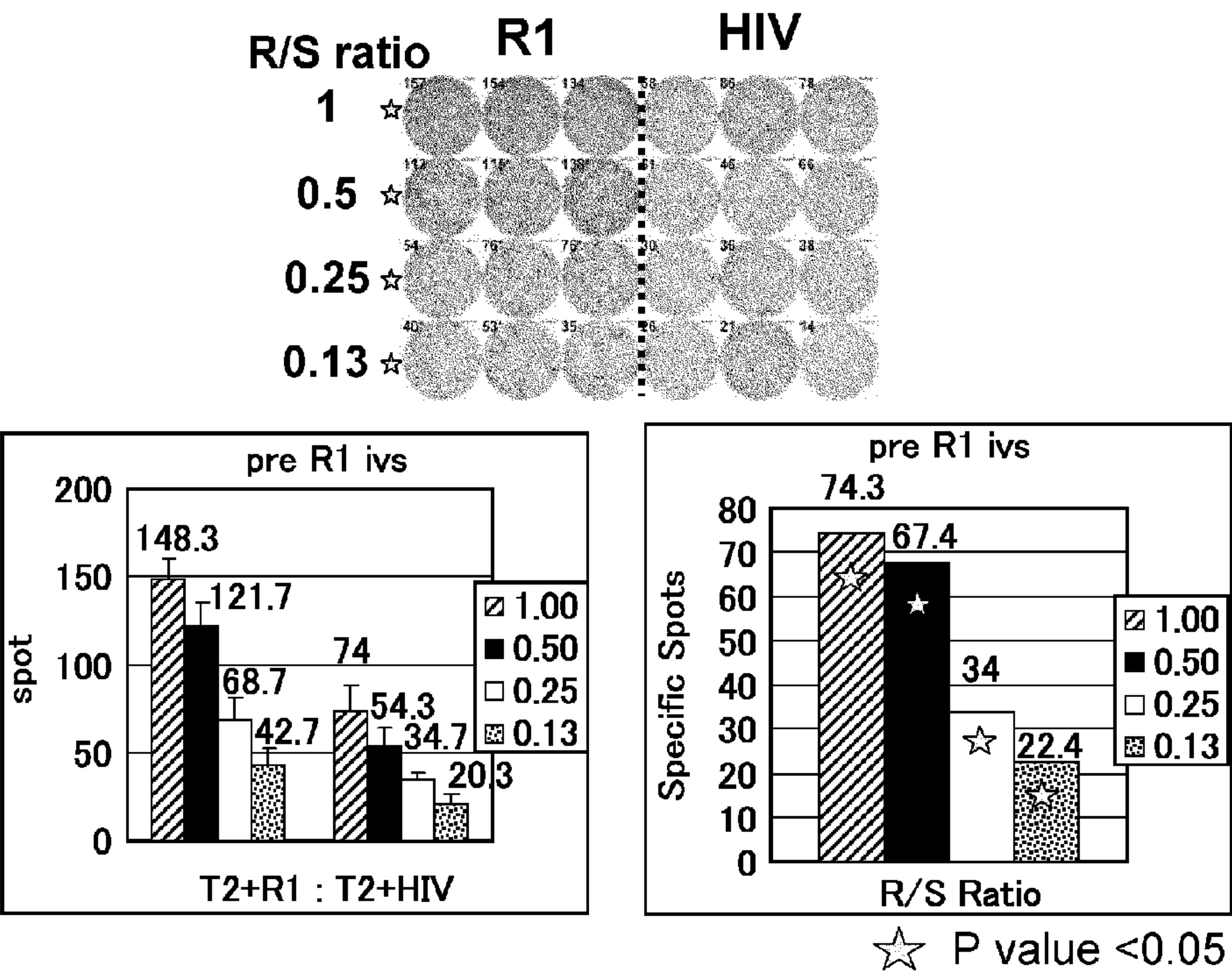


Fig. 4-1

a A0201-Case 1. pre-treatment (VEGFR1)



b A0201-Case 1. post-1course (VEGFR1)

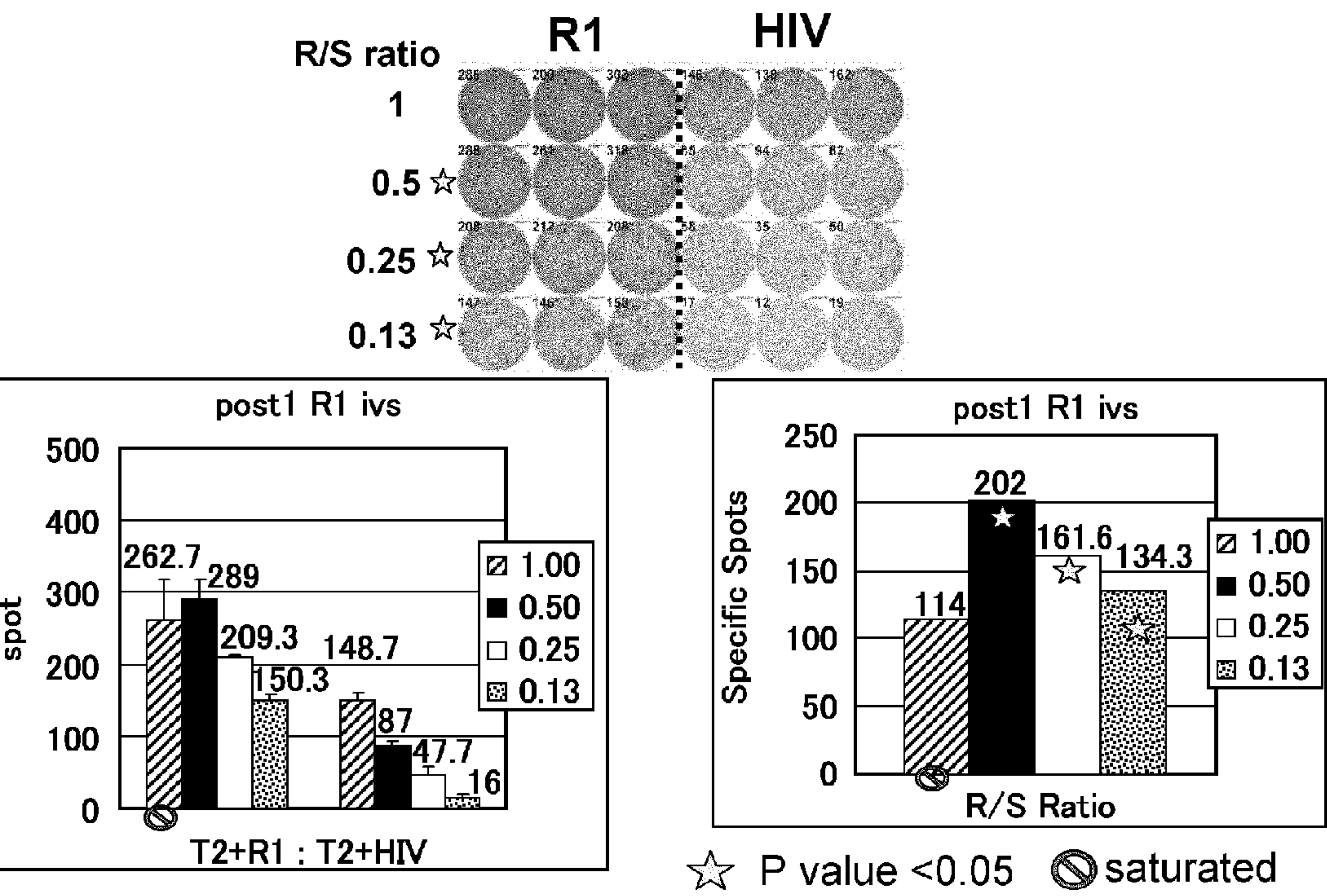
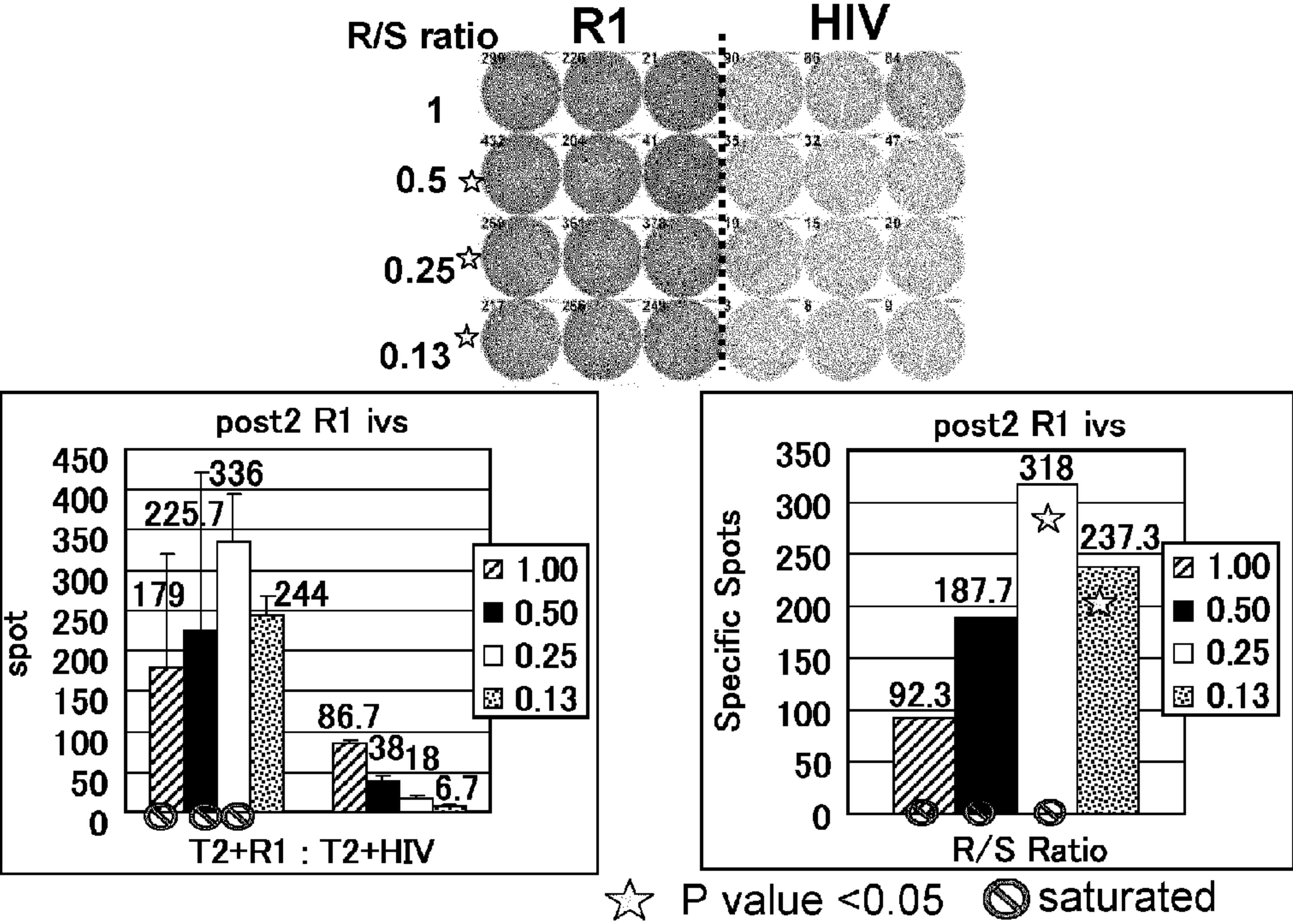


Fig. 4-2

c A0201-Case 1. post-2course (VEGFR1)



d A0201-Case 1. post-3course (VEGFR1)

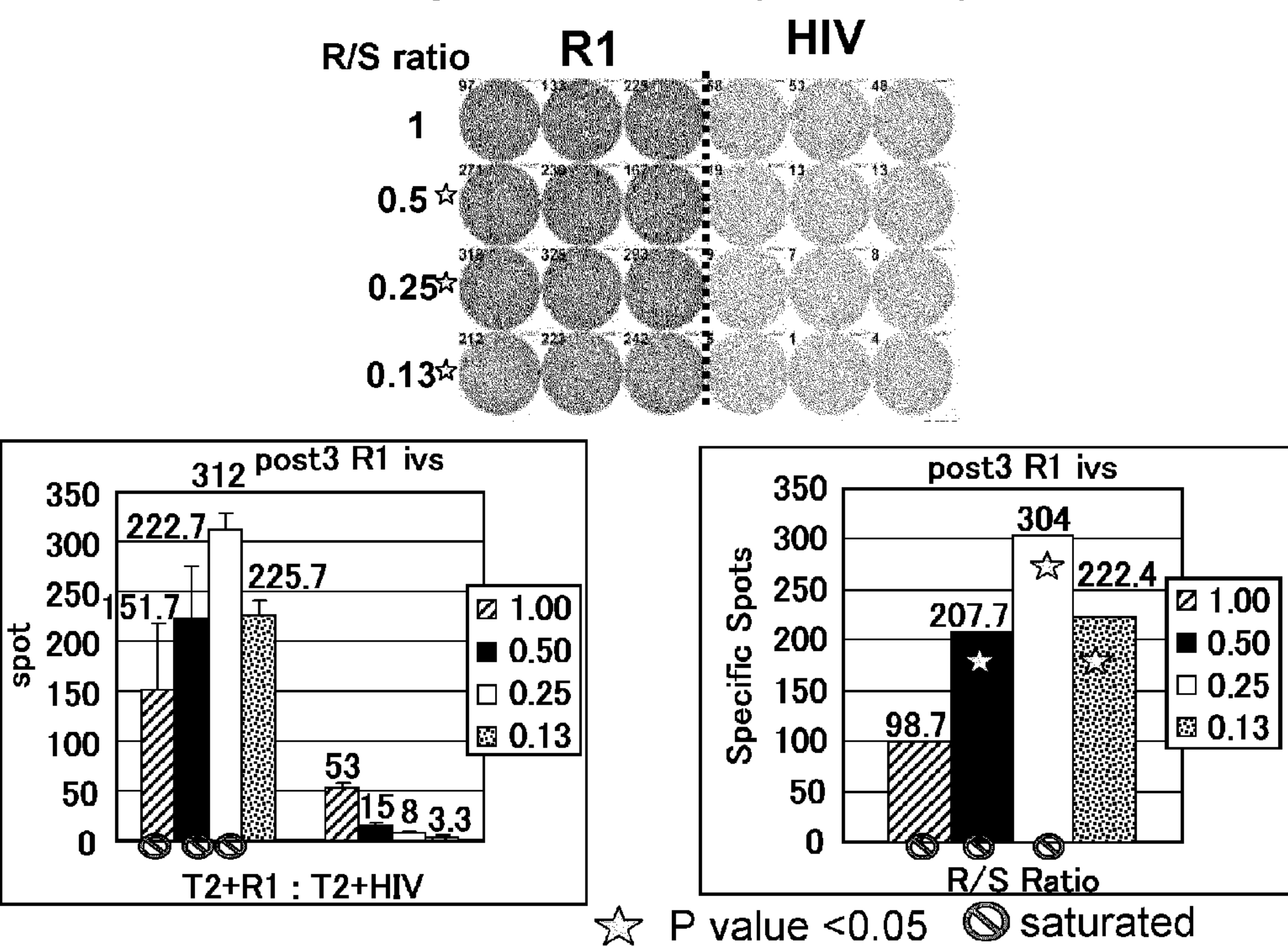


Fig. 4-3

e A0201-Case 1. post-4course (VEGFR1)

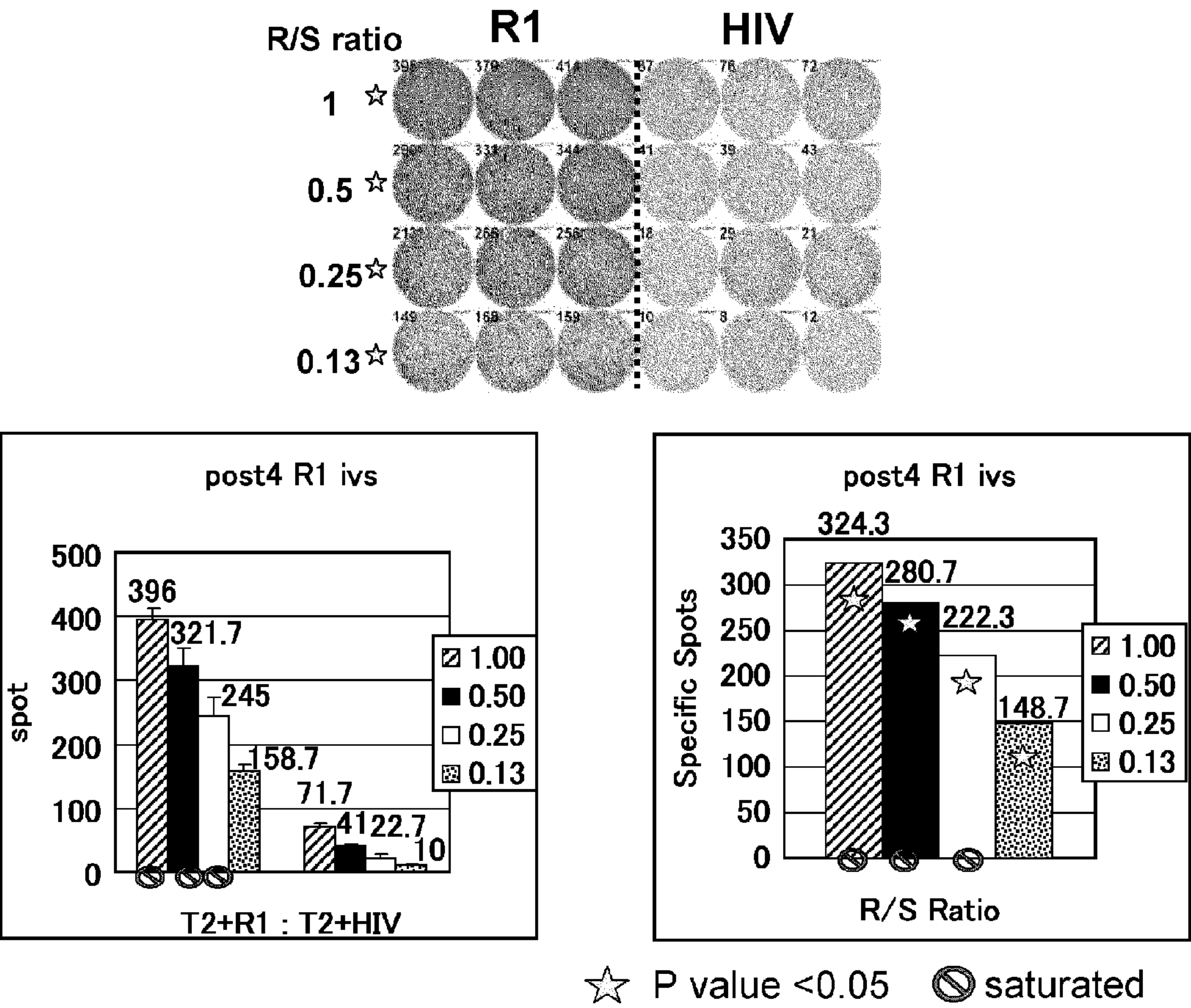
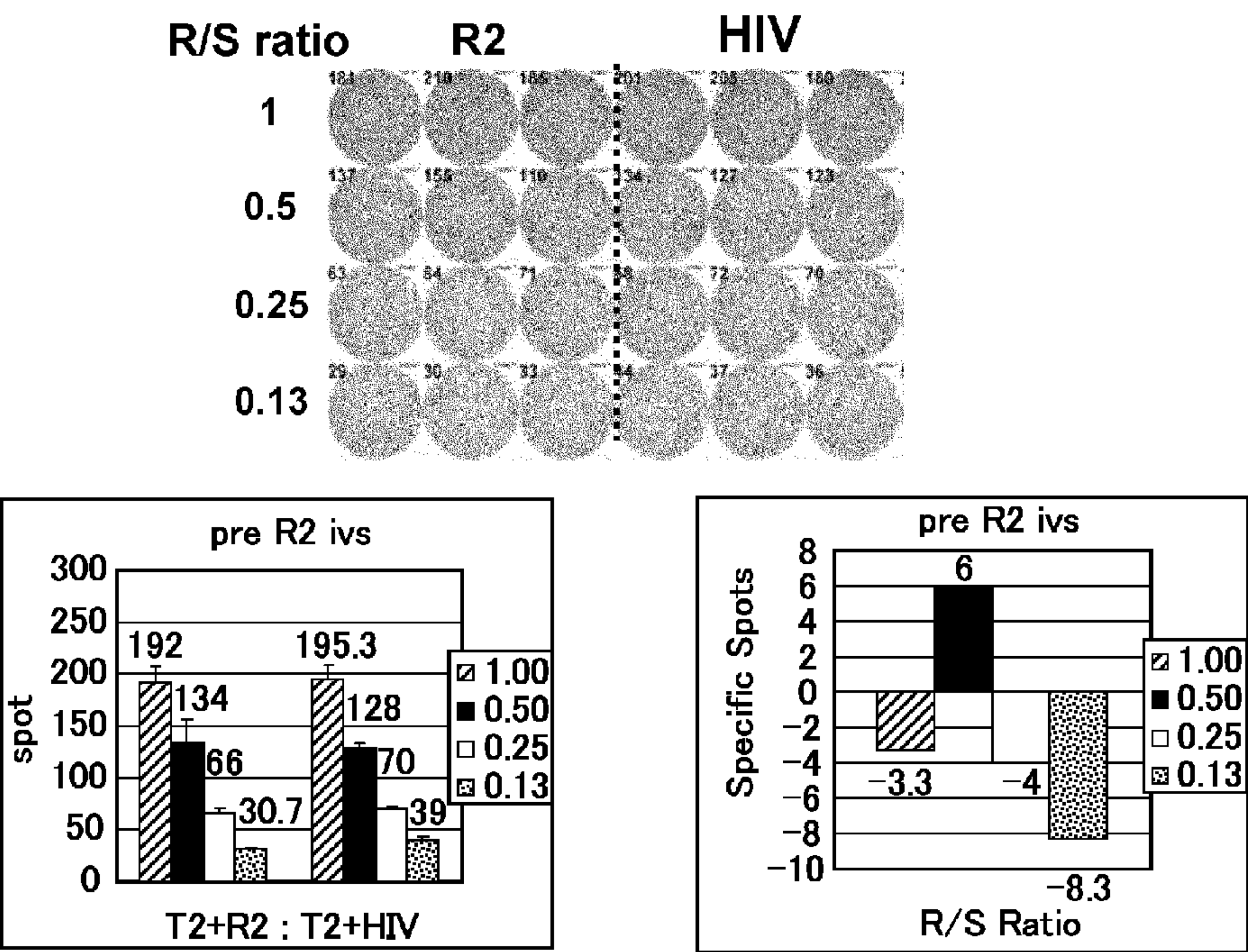


Fig. 5-1

a A0201-Case 1. pre-treatment (VEGFR2)



b A0201-Case 1. post-1course (VEGFR2)

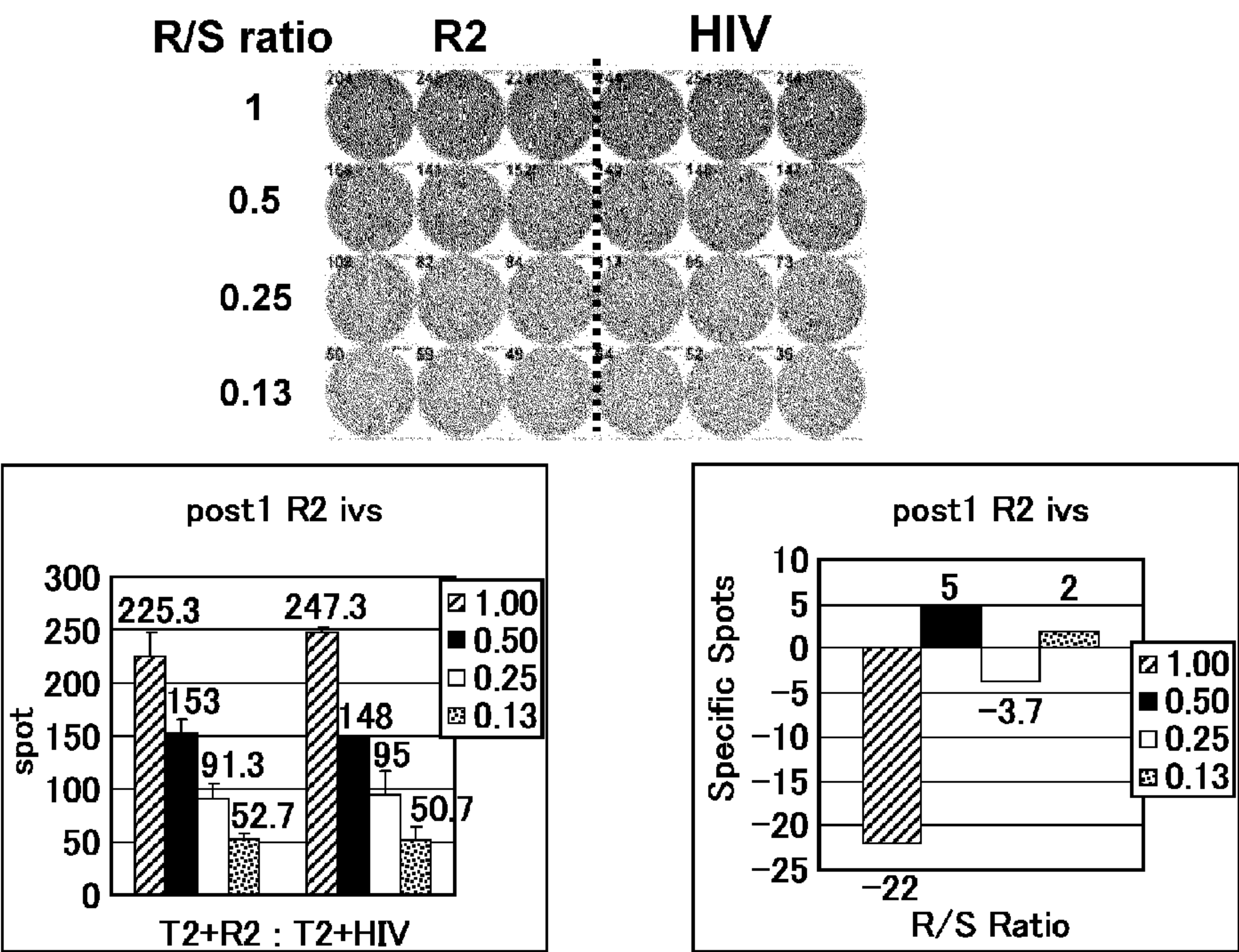
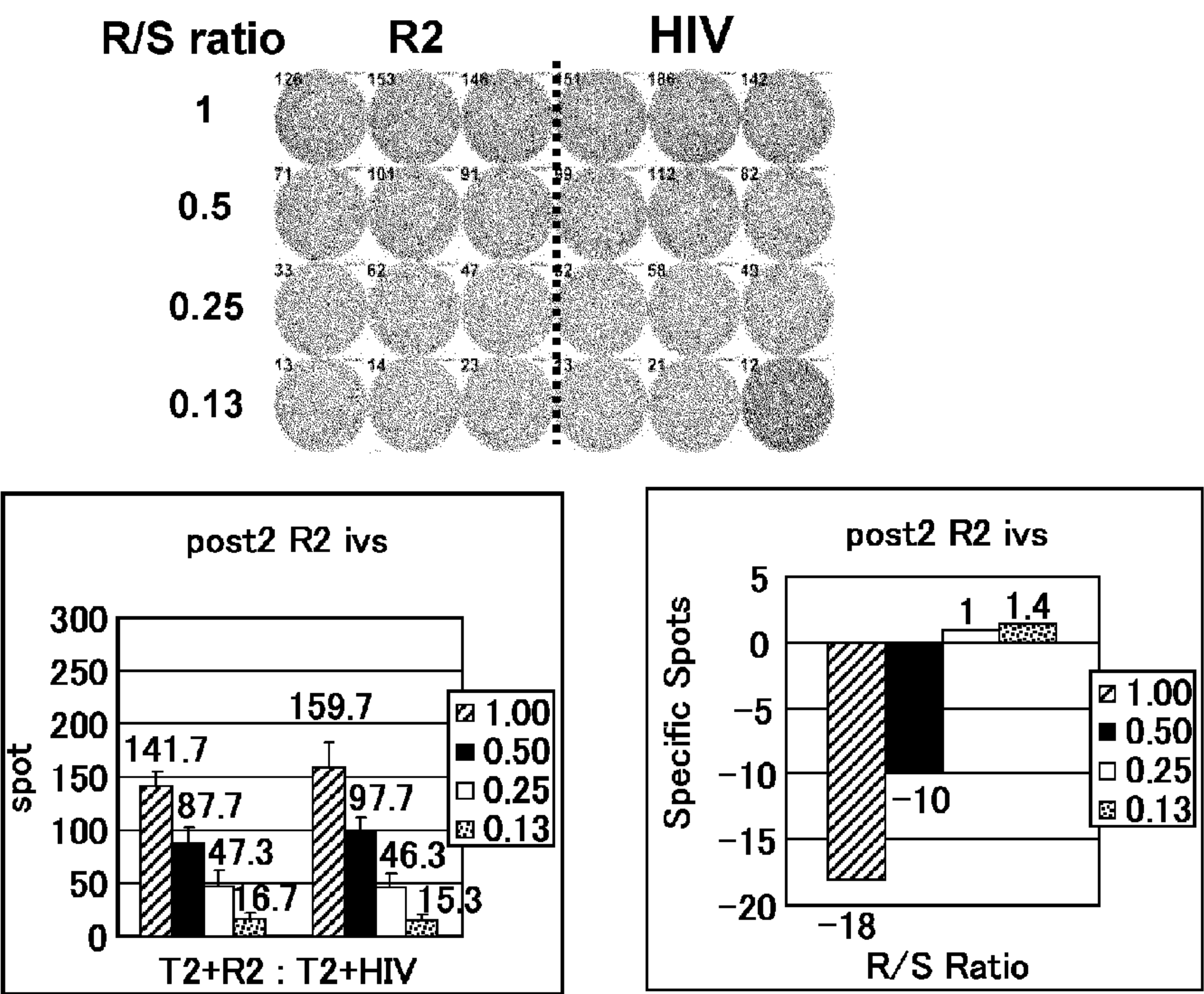


Fig. 5-2

c A0201-Case 1. post-2course (VEGFR2)



d A0201-Case 1. post-3course (VEGFR2)

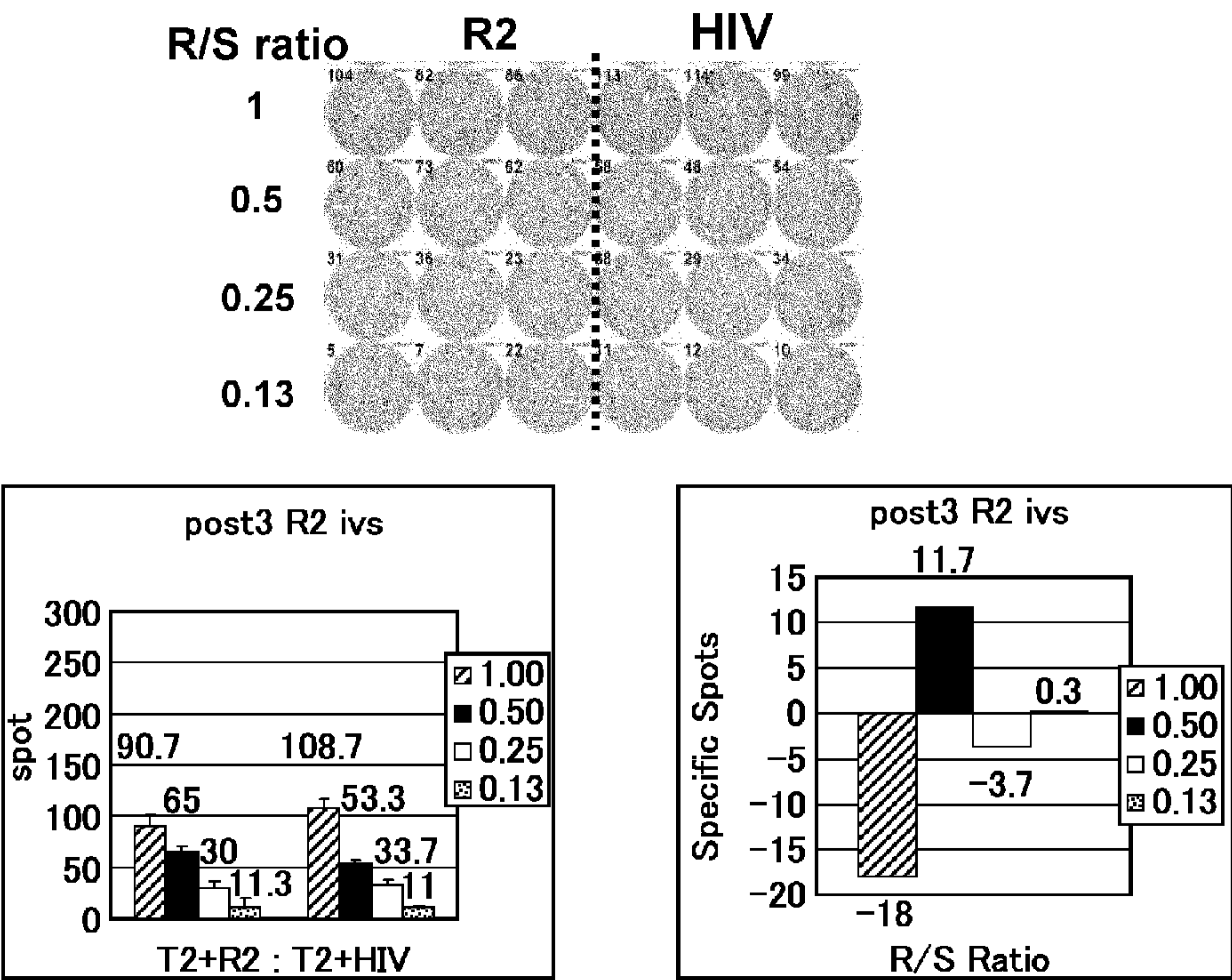


Fig. 5-3

e A0201-Case 1. post-4course (VEGFR2)

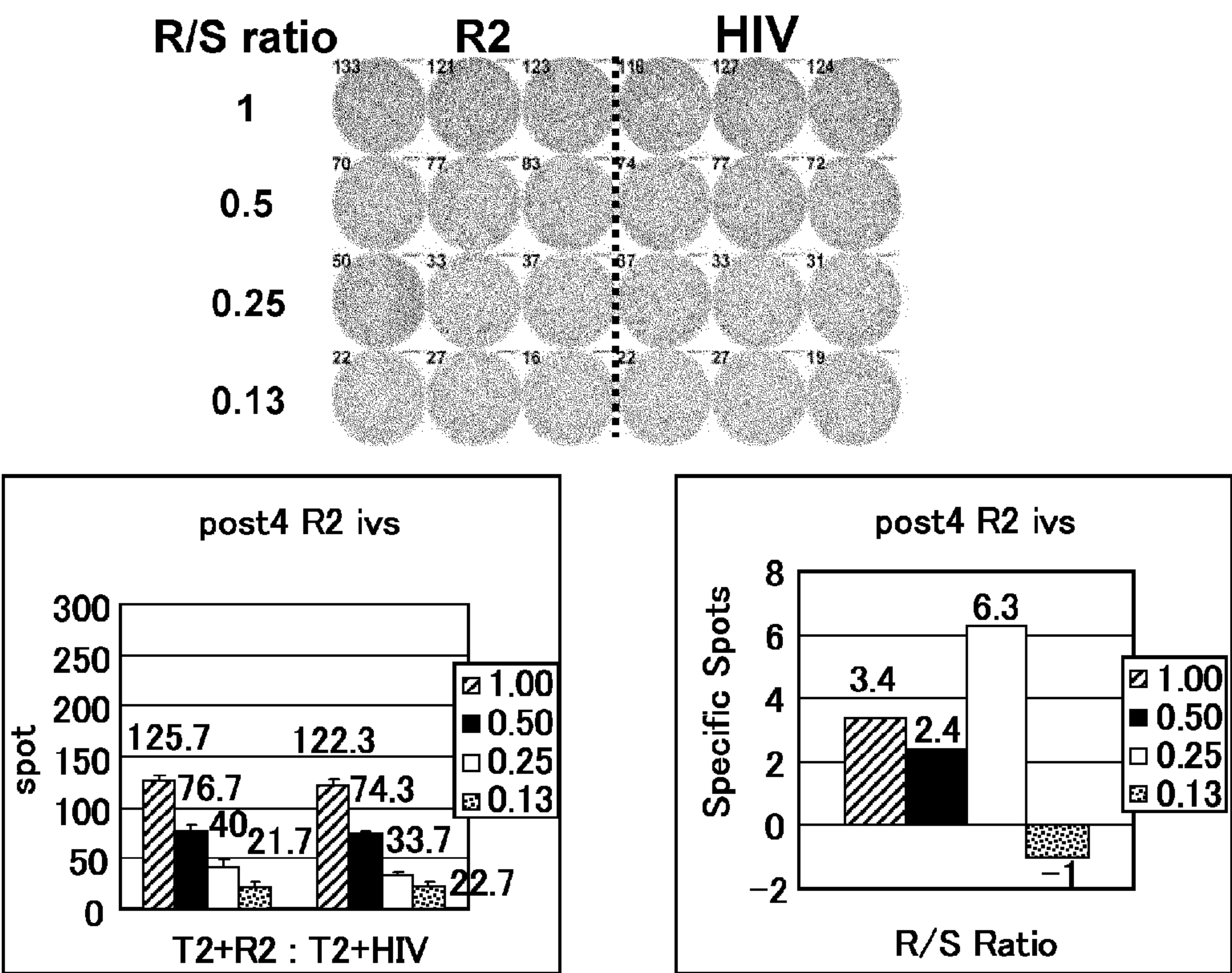


Fig. 6-1

a A0201-Case 3. post-1course (VEGFR1)

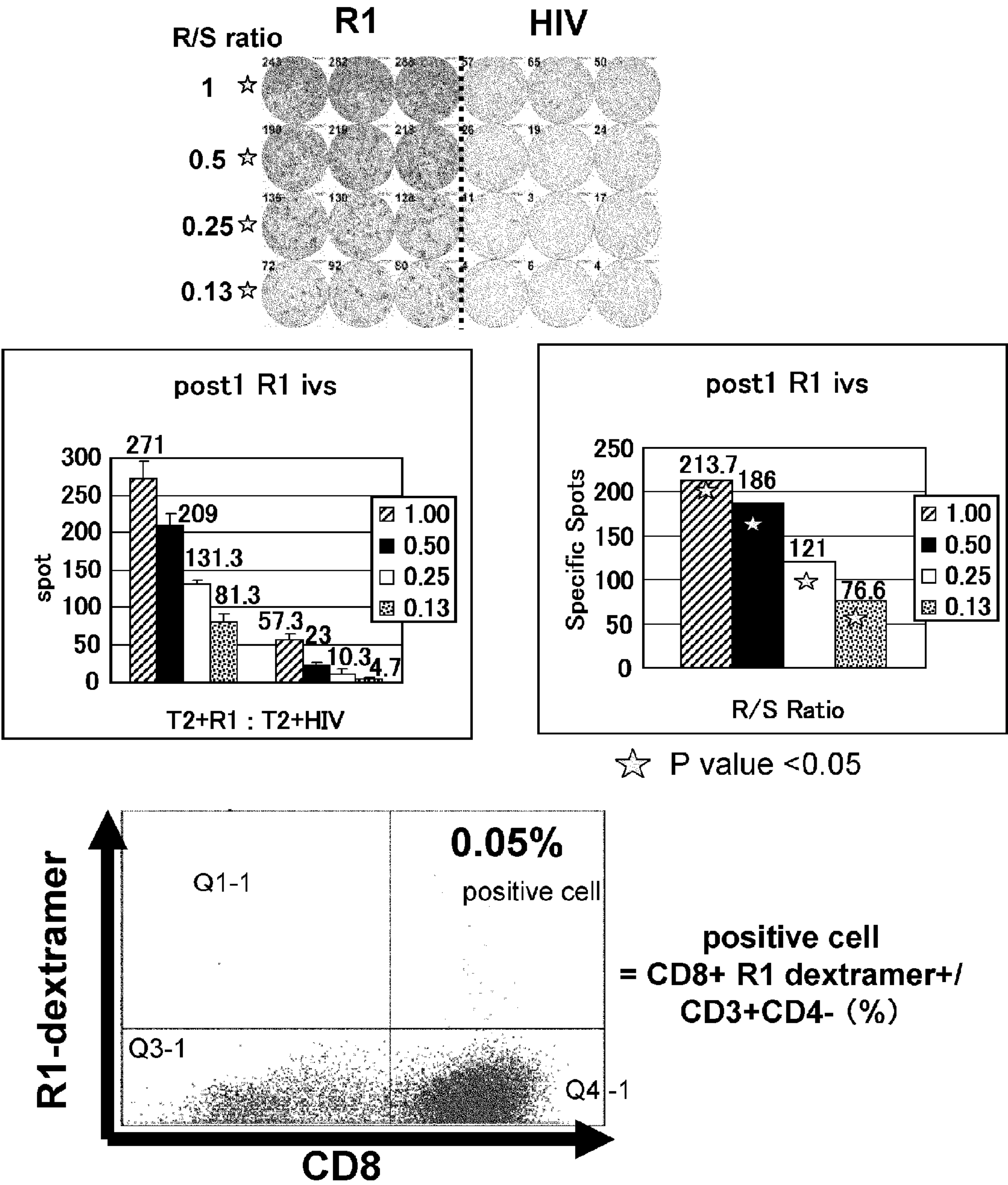


Fig. 6-2

b A0201-Case 3. post-3course (VEGFR1)

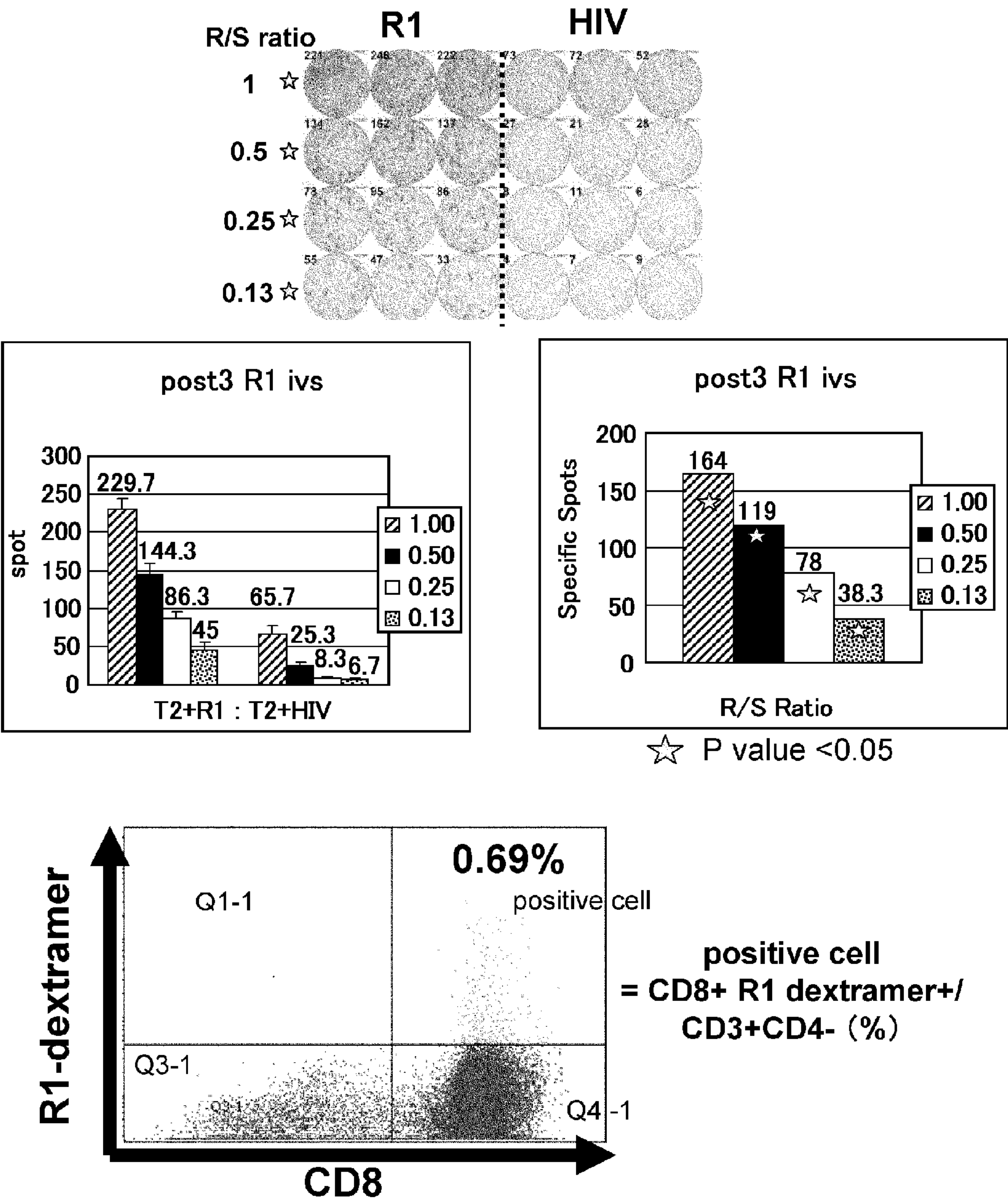


Fig. 6-3
c A0201-Case 3. post-4course (VEGFR1)

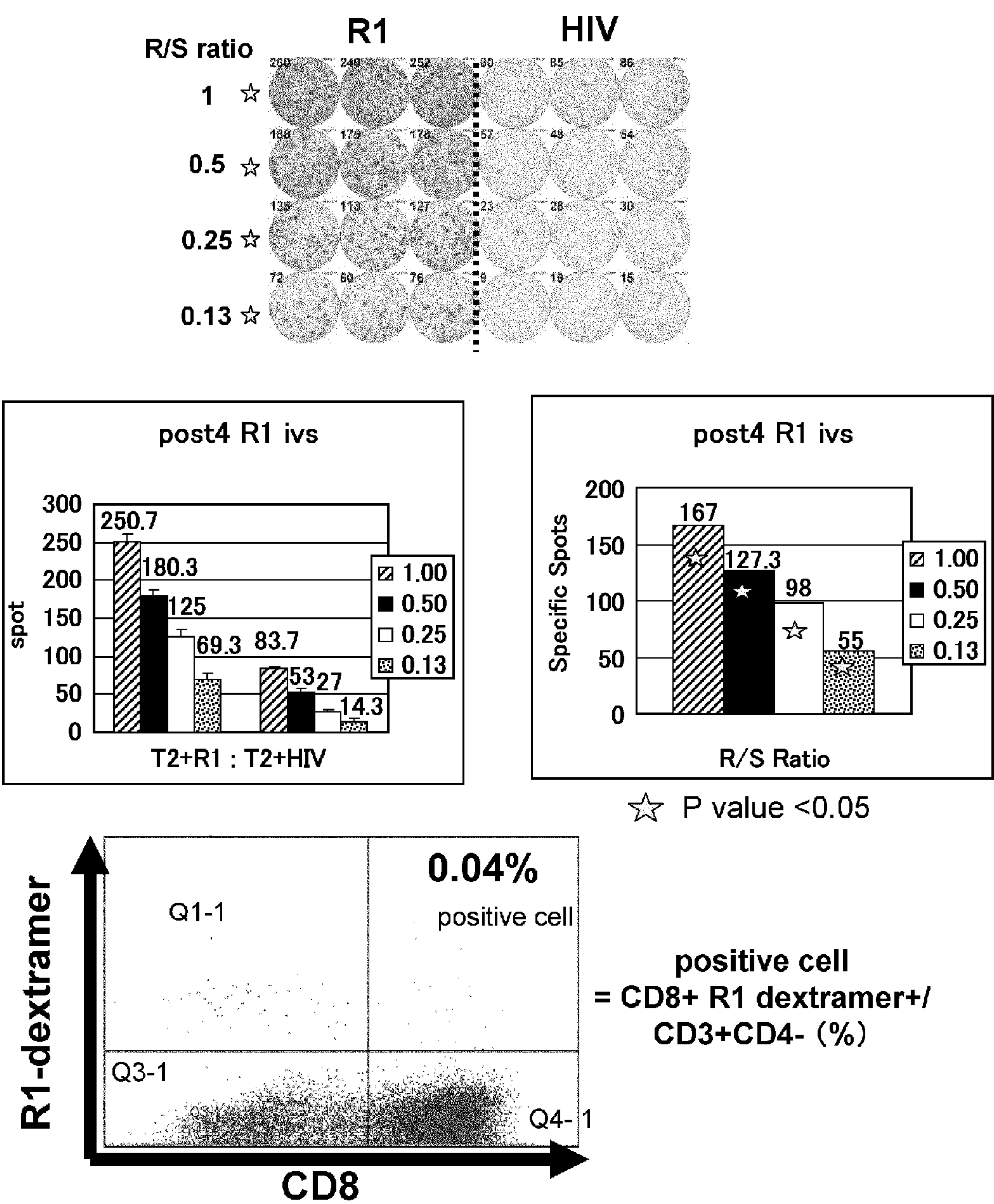


Fig. 6-4
d A0201-Case 3. post-5 course (VEGFR1)

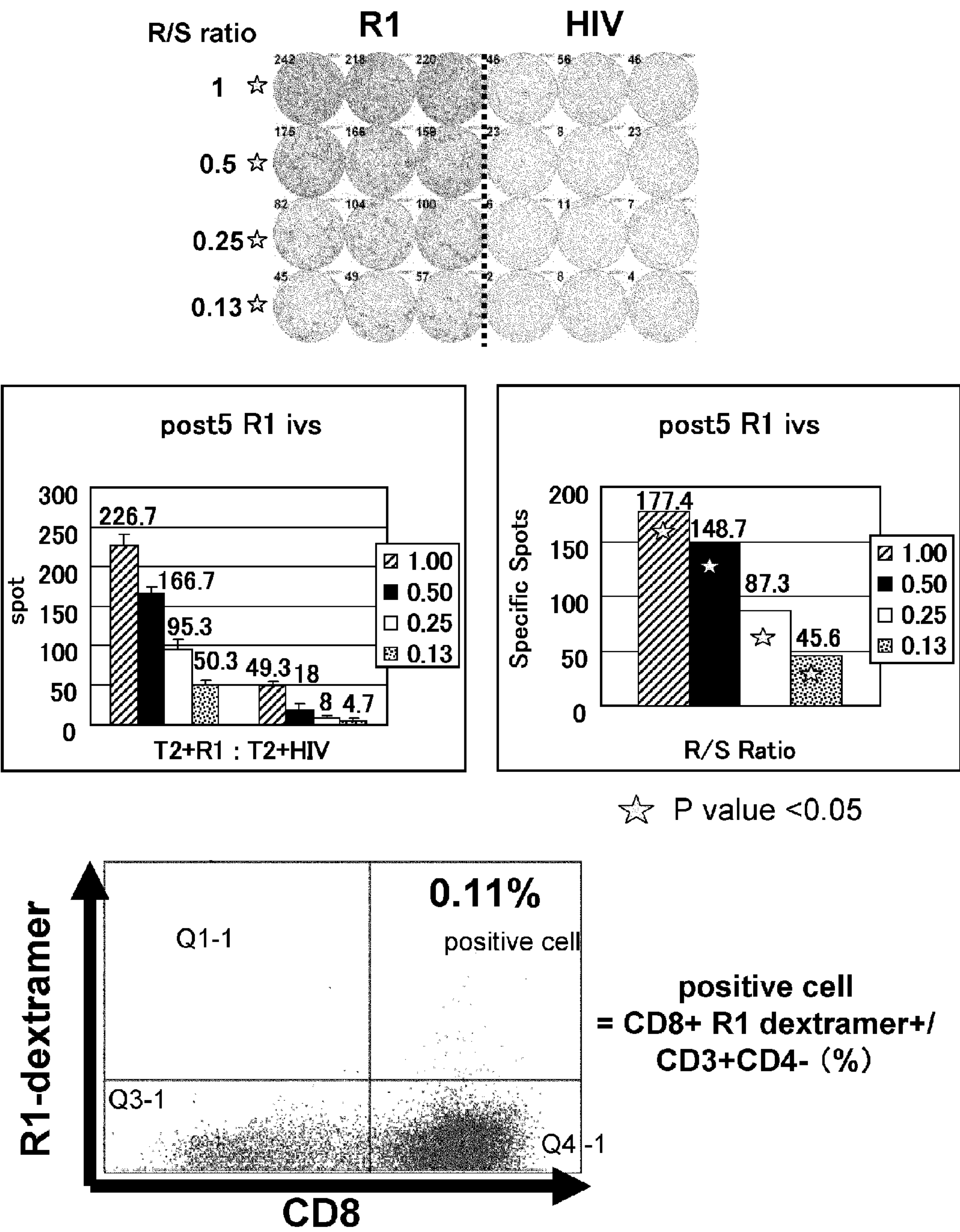
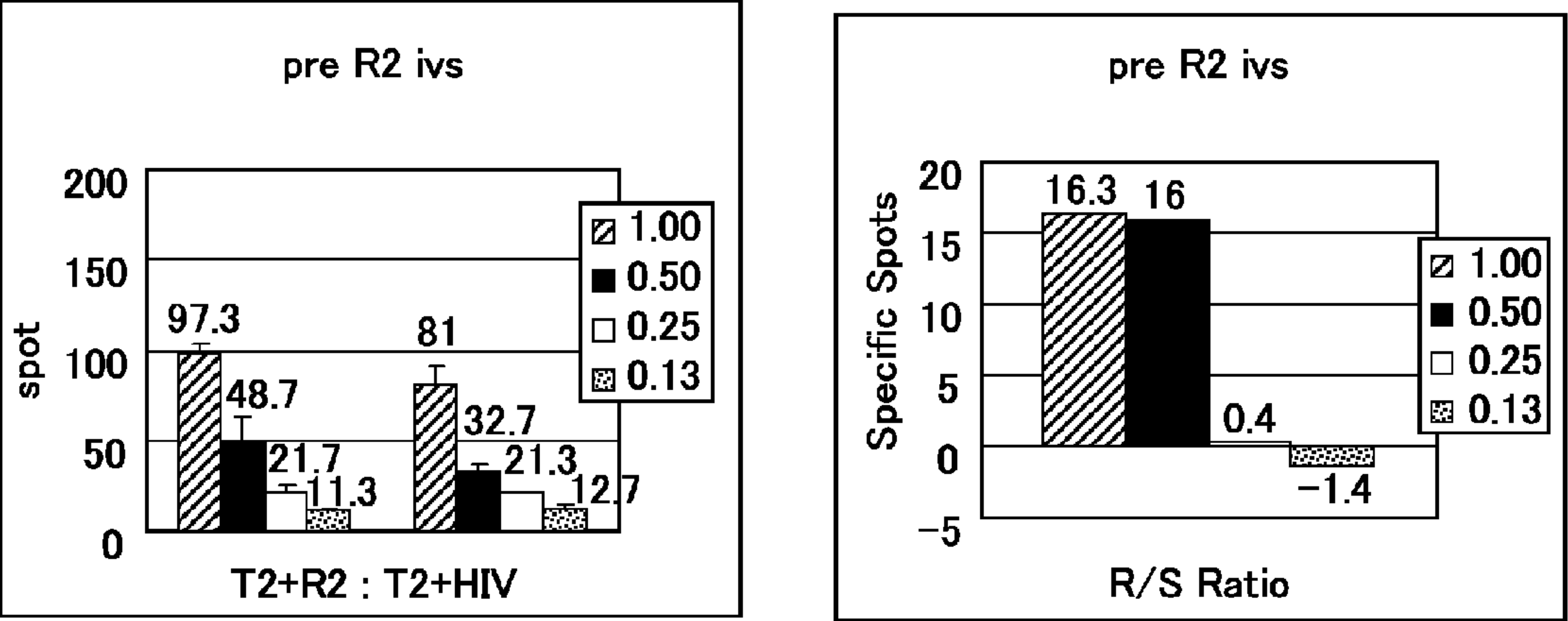
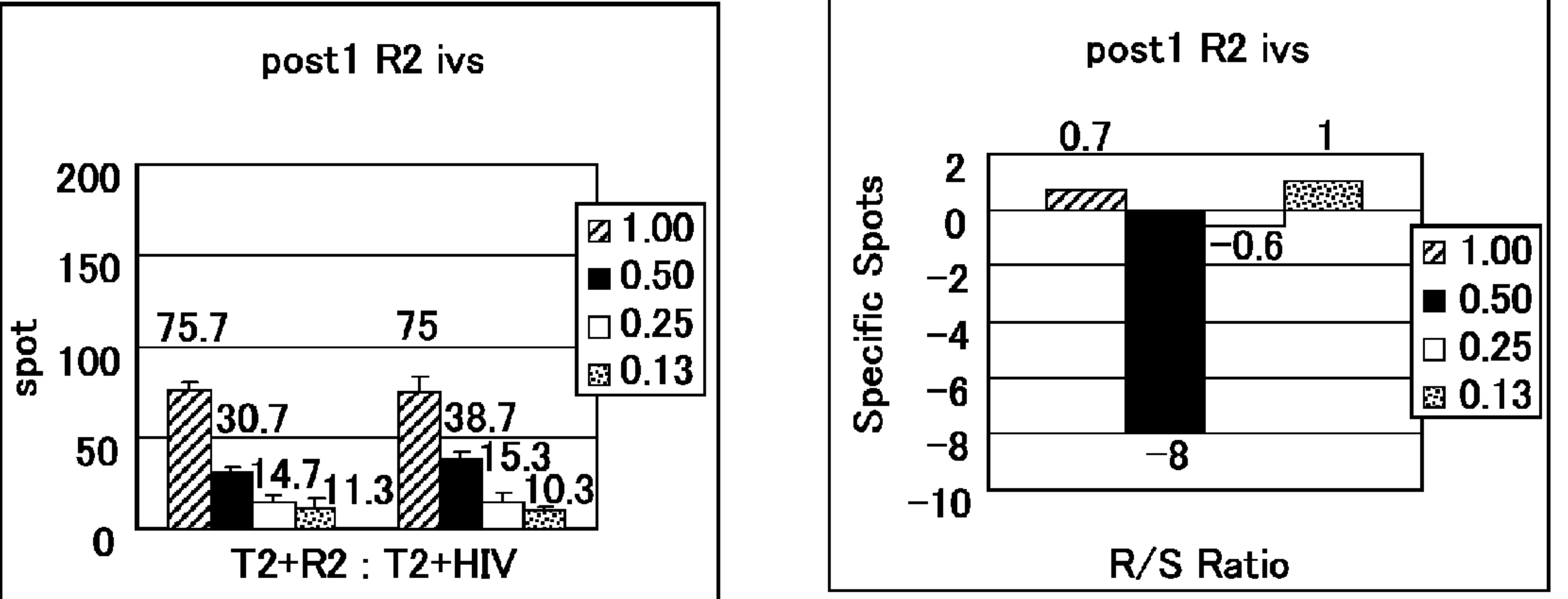


Fig. 7-1

a A0201-Case 3. pre-treatment (VEGFR2)



b A0201-Case 3. post-1course (VEGFR2)



c A0201-Case 3. post-3course (VEGFR2)

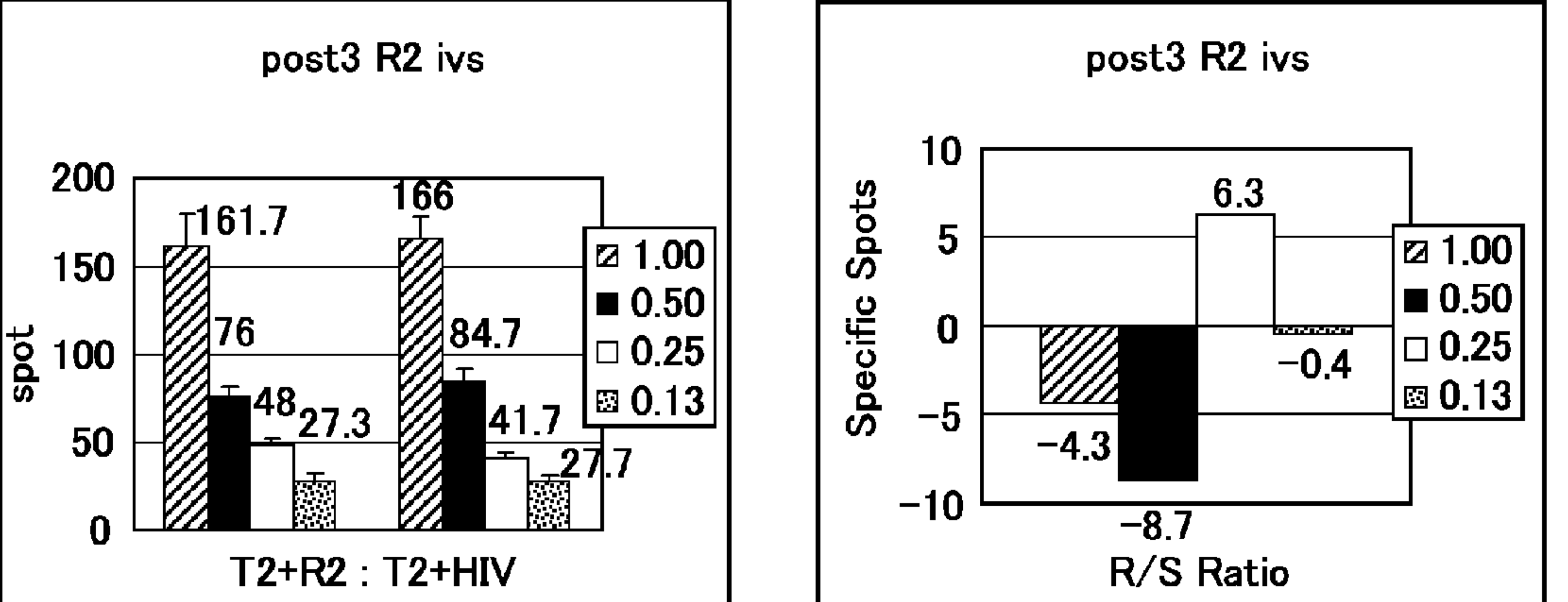
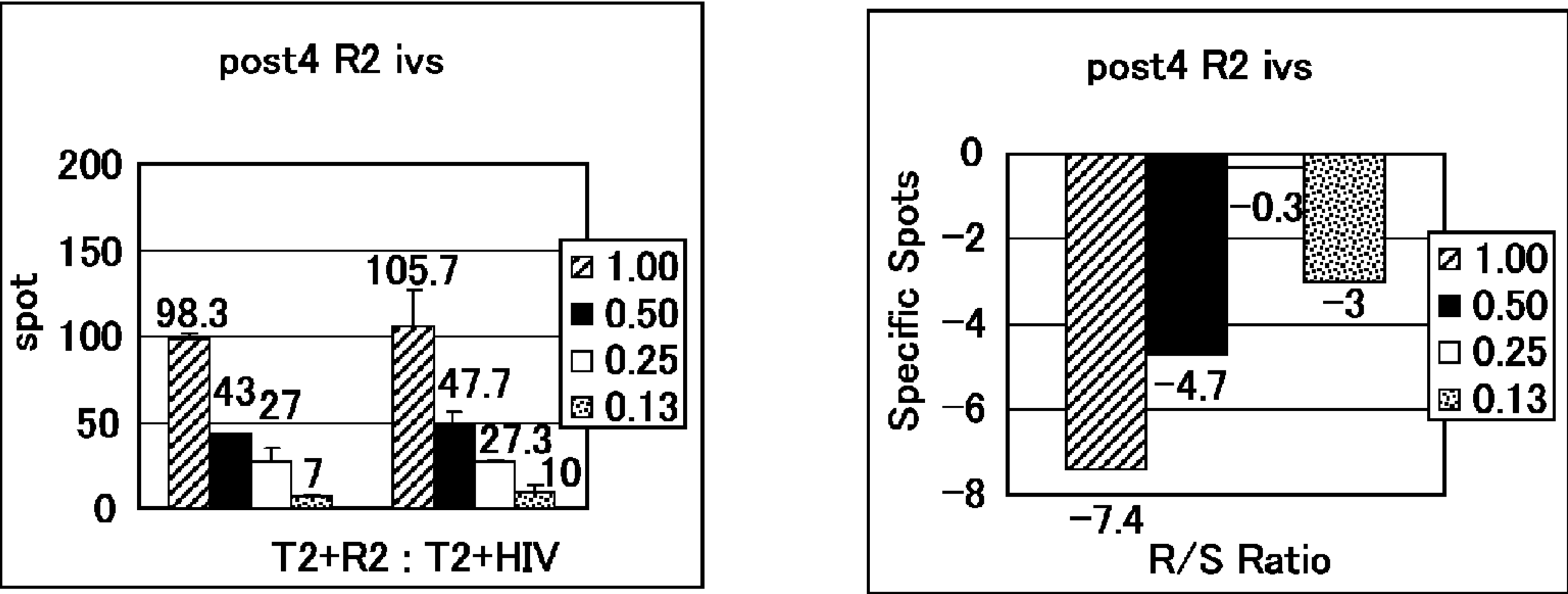


Fig. 7-2

d A0201-Case 3. post-4course (VEGFR2)



e A0201-Case 3. post-5course (VEGFR2)

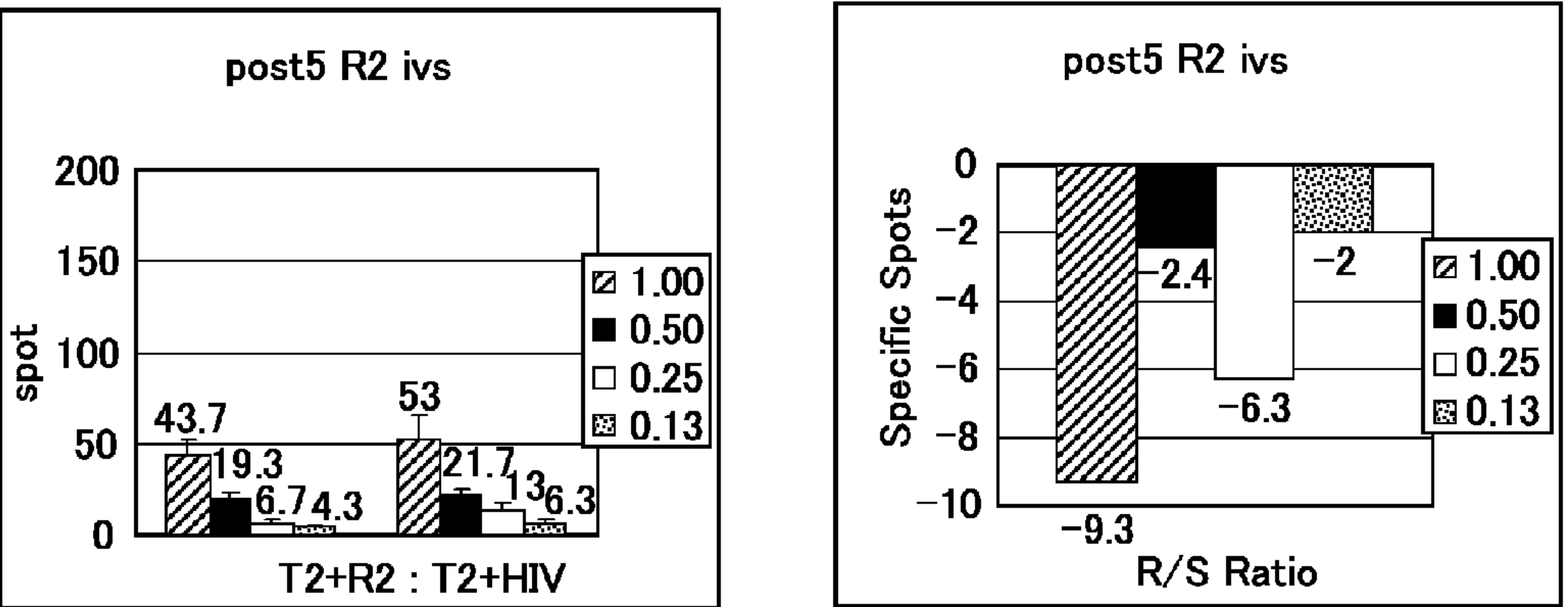
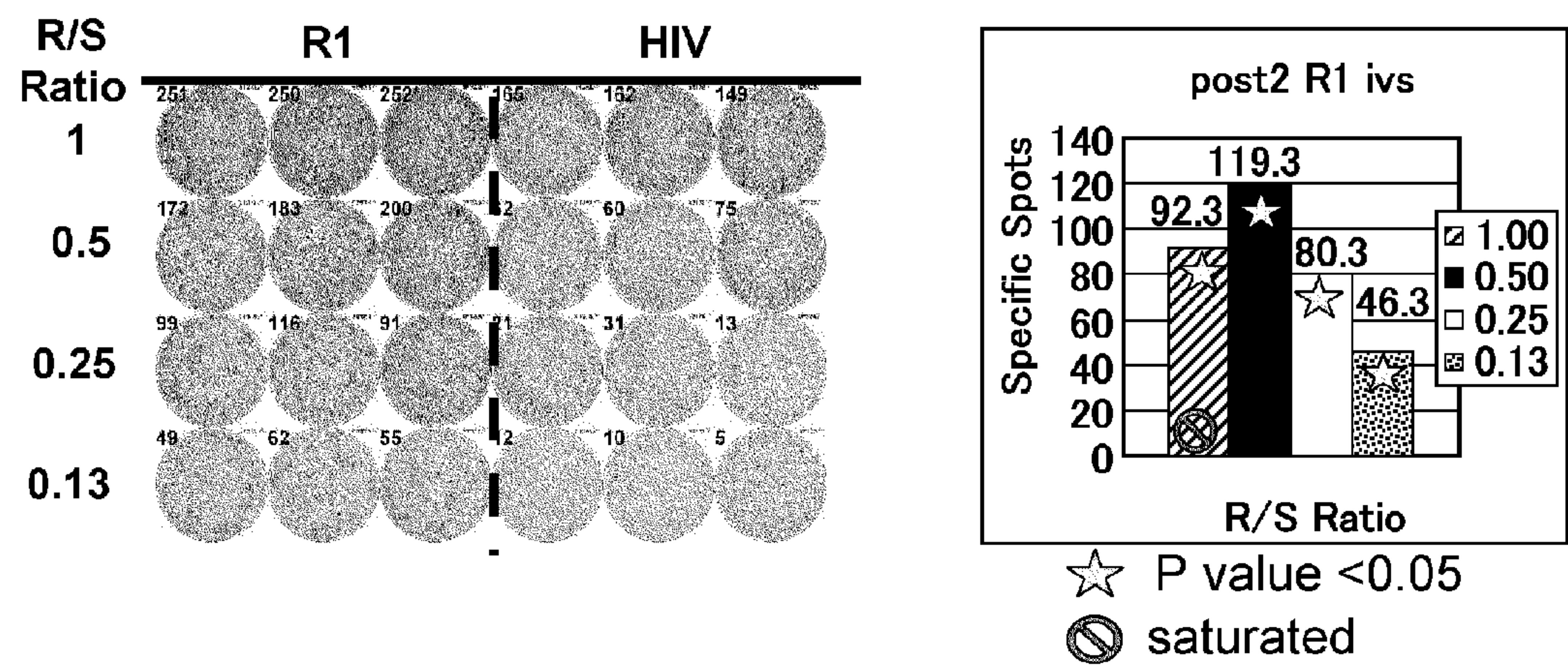


Fig. 8

a A2402-Case 1. post-2course (VEGFR1)



b A2402-Case 1. post-6course (VEGFR1)

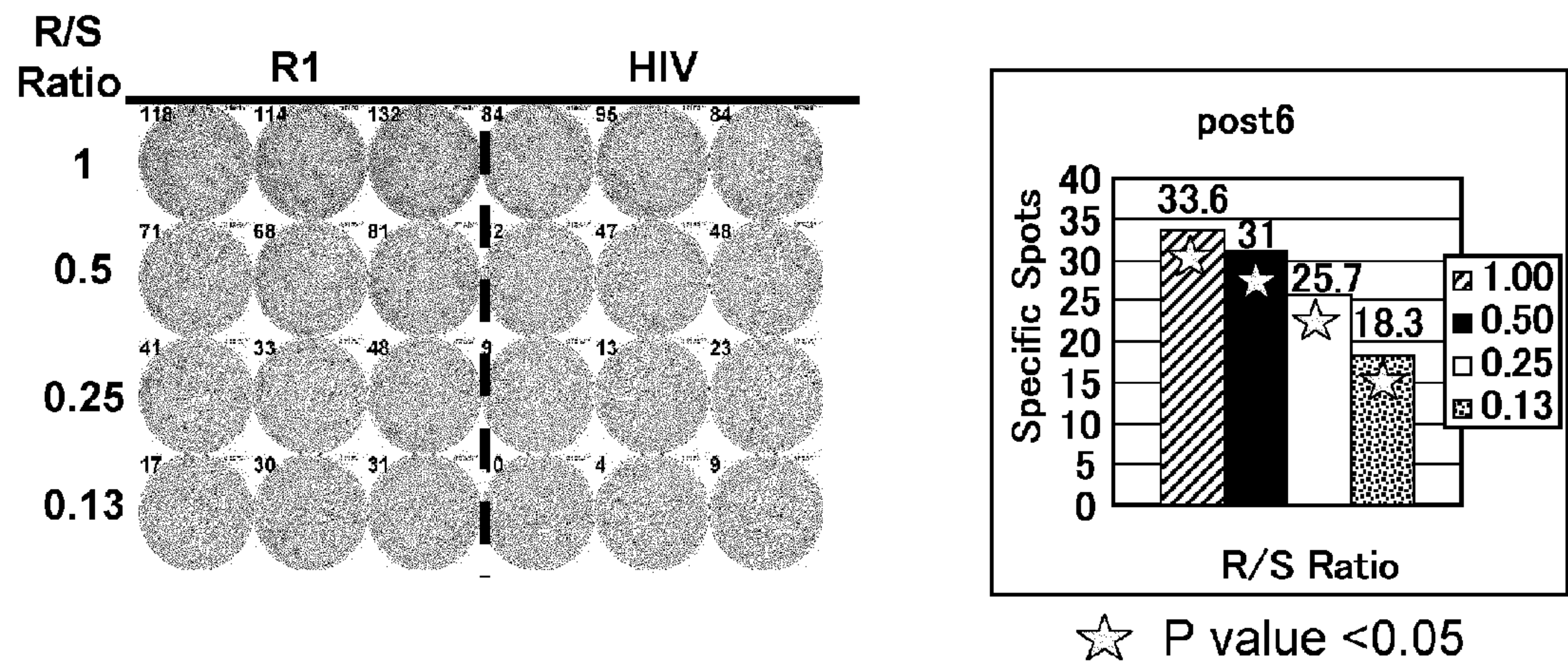
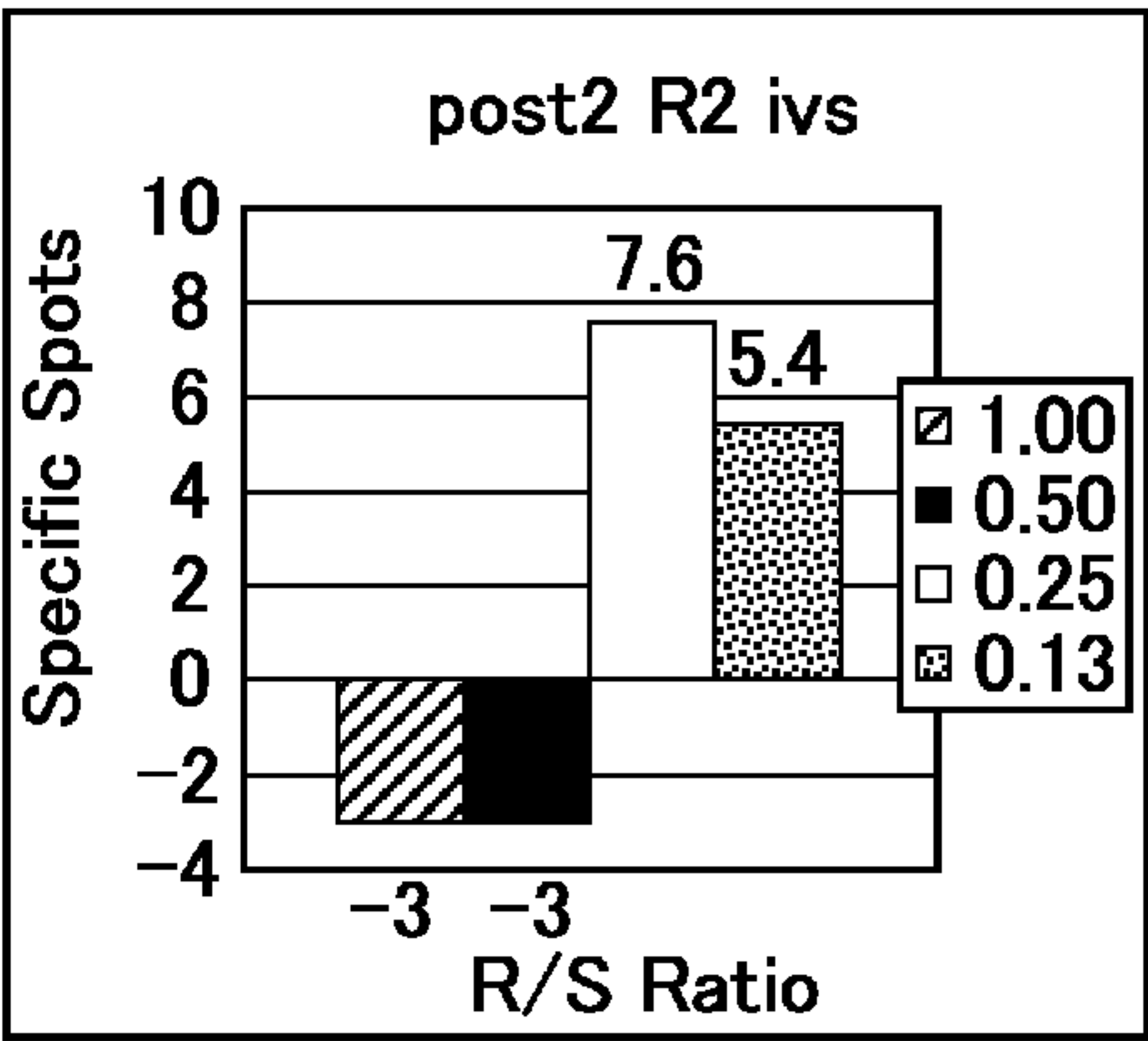


Fig. 9

a A2402-Case 1. post-2course (VEGFR2)



b A2402-Case 1. post-6course (VEGFR2)

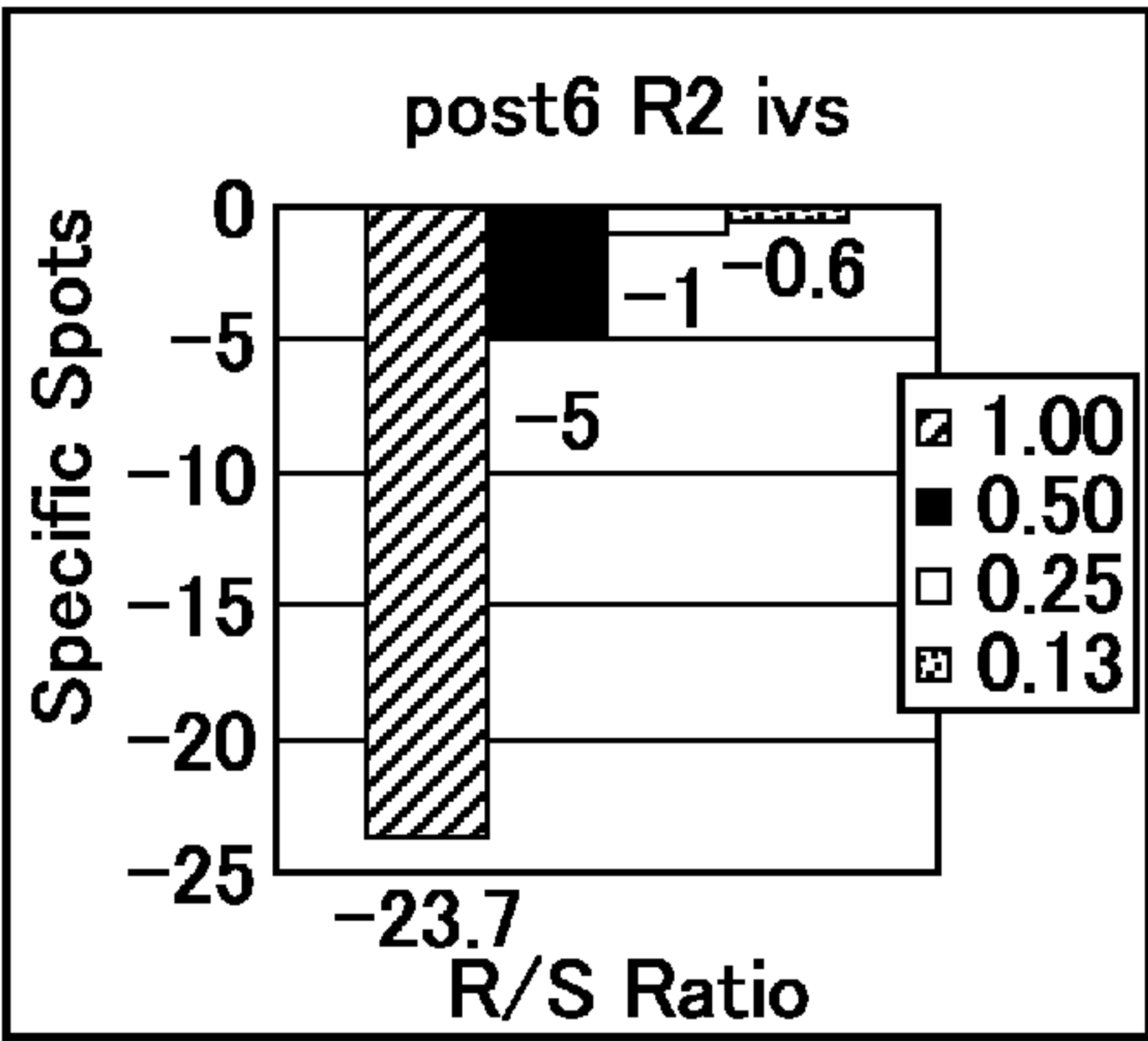
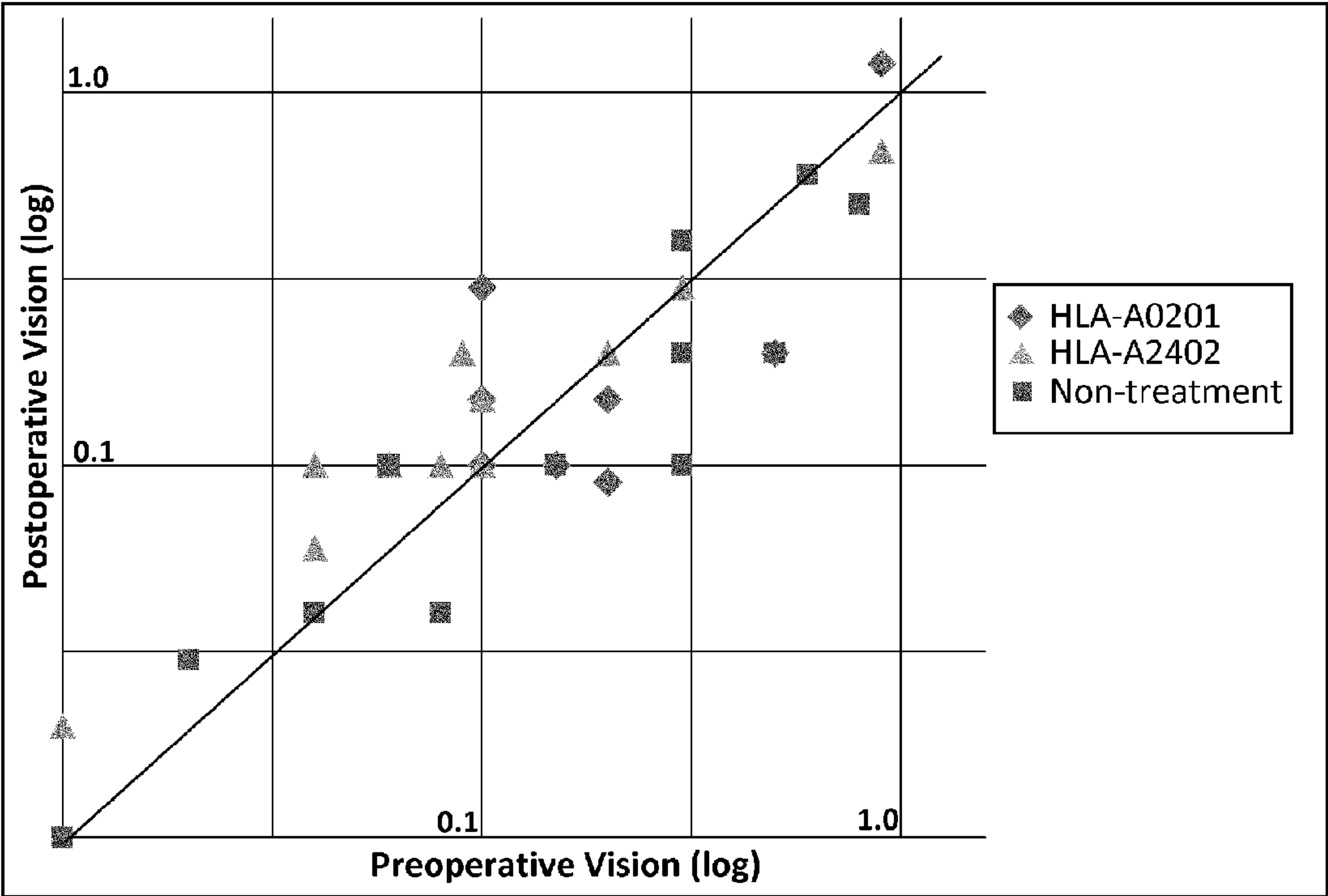


Fig. 10
Change in vision after treatment



METHODS FOR TREATING A DISEASE CAUSED BY CHOROIDAL NEOVASCULARIZATION

PRIORITY

This application is a U.S. National Phase of PCT/JP2010/003871, filed Jun. 10, 2010, which claims the benefit of Japanese Patent Application Number. 2009-140363 filed Jun. 11, 2009, the contents of which are hereby incorporated herein by reference in their entirety for all purposes.

REFERENCE TO A SEQUENCE LISTING

This application includes a Sequence Listing as a text file named "SEQTEXT 87331-027400US-825489.txt" created Dec. 7, 2011 and containing 44,327 bytes. The material contained in this text file is incorporated by reference in its entirety for all purposes.

TECHNICAL FIELD

This application claims the benefit of Japanese Patent Application Number. 2009-140363 filed Jun. 11, 2009, the contents of which are hereby incorporated herein by reference in their entirety for all purposes.

The present invention relates to pharmaceutical compositions and vaccines for treatment and/or prevention of diseases caused by neovascularization in the choroid (neovascular maculopathy). The present invention also relates to pharmaceutical compositions and vaccines for inhibiting neovascularization in the choroid.

BACKGROUND ART

Exudative age-related macular degeneration (AMD) caused by choroid neovascularization (CNV) is one of the major causes for severe visual impairment in developed countries. Evidence to date suggests that vascular endothelial growth factor (VEGF) plays a central role in the development of CNV. For example, it has been reported that CNV is suppressed by compounds that inhibit the production of VEGF or compounds that inhibit the signal transduction pathway of VEGF. Furthermore, it has also been reported that anti-VEGF antibodies show higher therapeutic efficacy compared to conventional therapeutic methods including photodynamic therapy. Therefore, in recent years, anti-VEGF agents have become a main option for drug therapy against CNV.

VEGF signaling is mediated by two types of receptor tyrosine kinases, i.e., VEGF receptor 1 (VEGFR-1) and VEGF receptor 2 (VEGFR-2). The two receptors are expressed on the human CNV membrane and the laboratory mouse CNV membrane. However, the role of VEGFR-1 signal transduction pathway in CNV is still controversial. For example, one study reports that the inhibition of VEGFR-1 signaling by oral administration of an antibody, gene knock-down, or siRNA inhibits CNV. Another study reports that in the eye, activation of VEGFR-1 by VEGF or placental growth factor 1 (PlGF1), which is a ligand of VEGFR-2, leads to activation of CNV via activation of VEGFR-2 by SPARC. On the other hand, for VEGFR-2, the finding that activation of VEGFR-2 signaling promotes CNV growth is generally accepted. Thus, antiangiogenic approaches targeting VEGFR-2, such as systemic or local administration of anti-VEGFR-2 agents or VEGFR-2 antibodies, and intravitreal administration of siRNA, are expected to inhibit VEGFR-2 signaling and CNV growth.

However, the problem with currently available anti-VEGF agents is that they need to be injected repeatedly at 4- to 6-week intervals. Furthermore, there is a high risk of severe complications such as endophthalmitis and retinal detachment. Therefore, it is desirable to establish a novel therapeutic method that replaces currently used anti-VEGF agents.

A vaccine using a peptide derived from human VEGF receptor 2 is known to induce cytotoxic T-lymphocytes (CTLs) in tumor tissues which have potent cytotoxicity against VEGFR-2-expressing endothelial cells (Patent Document 1). A vaccine using a peptide derived from human VEGF receptor 1 is also known to induce CTLs which have potent cytotoxicity against VEGFR-1-expressing endothelium (Patent Document 2). Furthermore, a vaccine using a peptide derived from VEGF receptor 2 has been confirmed to have CNV inhibitory effects in mice (Patent Document 3). However, as in other tissues, there are many unclear points in the mechanism of neovascularization in the choroid, and the presence of a vaccine that effectively inhibits CNV in human choroid is not known.

CITATION LIST

Patent Literature

[PTL 1] WO 2004/024766
[PTL 2] WO 2006/093030
[PTL 3] WO 2008/099908

SUMMARY OF INVENTION

Technical Problem

The present invention was achieved in view of the above circumstances. An objective to be achieved by the present invention is to provide novel pharmaceutical agents and methods for treating and/or preventing a disease caused by neovascularization in human choroid (neovascular maculopathy).

Solution to Problem

The present inventors administered a pharmaceutical composition/vaccine containing a VEGFR-1-derived peptide to neovascular maculopathy patients, and as a result discovered that this can effectively inhibit human CNV without causing problems suggestive of safety issue, and thereby completed the present invention.

More specifically, the present invention provides a pharmaceutical composition for treating and/or preventing a disease caused by neovascularization in human choroid (neovascular maculopathy), comprising as an active ingredient at least a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention also provides a vaccine for treating and/or preventing a disease caused by neovascularization in human choroid, comprising as an active ingredient at least a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention also provides a pharmaceutical composition for inhibiting neovascularization in human choroid, comprising as an active ingredient at least a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

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Furthermore, the present invention provides a vaccine for inhibiting neovascularization in human choroid, comprising as an active ingredient at least a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention provides a method for treating and/or preventing a disease caused by neovascularization in human choroid, comprising the step of administering to a subject at least a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention also provides a method for inhibiting neovascularization in human choroid, comprising the step of administering to a subject at least a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention further provides use of a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof in manufacturing a pharmaceutical composition for treating and/or preventing a disease caused by neovascularization in human choroid.

Furthermore, the present invention provides use of a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, in manufacturing a vaccine for treating and/or preventing a disease caused by neovascularization in human choroid.

The present invention also provides use of a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, in manufacturing a pharmaceutical composition for inhibiting neovascularization in human choroid.

In addition, the present invention provides use of a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, in manufacturing a vaccine for inhibiting neovascularization in human choroid.

The present invention further provides a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells for use in treating and/or preventing a disease caused by neovascularization in human choroid.

Alternatively, the present invention further provides a method or process for manufacturing a pharmaceutical composition for treating or preventing a disease caused by neovascularization in human choroid, wherein the method or process includes the step of formulating a pharmaceutically or physiologically acceptable carrier with an active ingredient of a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

In another embodiment, the present invention also provides a method or process for manufacturing a pharmaceutical composition for treating or preventing a disease caused by neovascularization in human choroid, wherein the method or process includes the steps of admixing an active ingredient with a pharmaceutically or physiologically acceptable carrier, wherein the active ingredient is a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

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Alternatively, in one embodiment, in the present invention, VEGFR-1-derived peptide may also be administered in combination with a VEGFR-2-derived peptide for treating or inhibiting human CNV. Accordingly, the present invention provides a pharmaceutical composition for treating and/or preventing a disease caused by neovascularization in human choroid (neovascular maculopathy), comprising as an active ingredient at least one type each of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention also provides a vaccine for treating and/or preventing a disease caused by neovascularization in human choroid, comprising as an active ingredient at least one type each of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention also provides a pharmaceutical composition for inhibiting neovascularization in human choroid, comprising as an active ingredient at least one type each of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

Furthermore, the present invention provides a vaccine for inhibiting neovascularization in human choroid, comprising as an active ingredient at least one type each of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention provides a method for treating and/or preventing a disease caused by neovascularization in human choroid, comprising the step of administering to a subject at least one type each of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention also provides a method for inhibiting neovascularization in human choroid, comprising the step of administering to a subject at least one type each of a peptide selected from the group consisting of;

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(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

The present invention further provides use of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells,

in manufacturing a pharmaceutical composition for treating and/or preventing a disease caused by neovascularization in human choroid.

Furthermore, the present invention provides use of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells,

in manufacturing a vaccine, and/or a polynucleotide encoding thereof for treating and/or preventing a disease caused by neovascularization in human choroid.

The present invention also provides use of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, in manufacturing a pharmaceutical composition for inhibiting neovascularization in human choroid.

In addition, the present invention provides use of a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, in manufacturing a vaccine for inhibiting neovascularization in human choroid.

In addition, the present invention provides a peptide selected from the group consisting of;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof,

for use in treating or preventing a disease caused by neovascularization in human choroid.

In addition, the present invention provides a peptide selected from the group consisting of;

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(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, for use in inhibiting neovascularization in human choroid.

Alternatively, the present invention further provides a method or process for manufacturing a pharmaceutical composition for treating or preventing a disease caused by neovascularization in human choroid, wherein the method or process includes the step of formulating a pharmaceutically or physiologically acceptable carrier with an active ingredient selected from among;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, as active ingredients.

Alternatively, the present invention further provides a method or process for manufacturing a vaccine for inhibiting neovascularization in human choroid, wherein the method or process includes the step of formulating a pharmaceutically or physiologically acceptable carrier with an active ingredient selected from among;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof, as active ingredients.

In another embodiment, the present invention also provides a method or process for manufacturing a pharmaceutical composition for treating or preventing a disease caused by neovascularization in human choroid, wherein the method or process includes the steps of admixing an active ingredient with a pharmaceutically or physiologically acceptable carrier, wherein the active ingredient is selected from among;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

In another embodiment, the present invention also provides a method or process for manufacturing a vaccine for inhibiting neovascularization in human choroid, wherein the method or process includes the steps of admixing an active ingredient with a pharmaceutically or physiologically acceptable carrier, wherein the active ingredient is selected from among;

(a) a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof and

(b) a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells, and/or a polynucleotide encoding thereof.

More, specifically, the present invention provides the following [1] to [30];

[1] A pharmaceutical composition for treating and/or preventing a disease caused by neovascularization in human choroid (neovascular maculopathy), comprising as an active ingredient at least one type of the peptides of (a) peptides comprising an amino acid sequence derived from a VEGF receptor 1 protein and having an activity of inducing cytotoxic T cells, or a polynucleotide encoding thereof,

[2] The pharmaceutical composition of [1], wherein the above-mentioned peptides of (a) include the peptide of (i) and (ii) below:

(i) at least one peptide comprising any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 1 to 4;

(ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 1 to 4,

[3] The pharmaceutical composition of [2], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:

(1) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine;

(2) a peptide in which the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;

(3) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine, and the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;

(4) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, tyrosine, methionine, or tryptophan;

(5) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and

(6) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine,

[4] The pharmaceutical composition of any one of [1] to [3], wherein the composition further comprises at least one type of the peptides of (b) peptides comprising an amino acid sequence derived from a VEGF receptor 2 protein and having an activity of inducing cytotoxic T cells,

[5] The pharmaceutical composition of [4], wherein the above-mentioned peptides of (b) include (i) and (ii) below:

(i) at least one peptide comprising any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 5 to 17; and

(ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 5 to 17,

[6] The pharmaceutical composition of [5], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:

(1) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine;

(2) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;

(3) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;

(4) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan;

(5) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and

(6) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine,

[7] The pharmaceutical composition of any one of [1] to [6], wherein the disease caused by neovascularization in the choroid (neovascular maculopathy) is selected from exudative age-related macular degeneration, myopic macular degeneration, angioid streaks, central exudative chorioretinopathy, various retinal pigment epitheliopathy, choroidal atrophy, choroideremia, and choroidal osteoma,

[8] The pharmaceutical composition of any one of [1] to [7], which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24,

[9] A vaccine for treating and/or preventing a disease caused by neovascularization in human choroid (neovascular maculopathy), comprising as an active ingredient at least one type of the peptides of (a) peptides comprising an amino acid sequence derived from a VEGF receptor 1 protein and having an activity of inducing cytotoxic T cells, or a polynucleotide encoding thereof,

[10] The vaccine of [9], wherein the above-mentioned peptides of (a) include the peptide of (i) and (ii) below:

(i) at least one peptide comprising any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 1 to 4; and

(ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 1 to 4,

[11] The vaccine of [10], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:

(1) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine;

(2) a peptide in which the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;

(3) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine, and the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;

(4) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, tyrosine, methionine, or tryptophan;

(5) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and

(6) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is

- phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine,
- [12] The vaccine of any one of [9] to [11], wherein the vaccine further comprises at least one type of the peptides of (b) peptides comprising an amino acid sequence derived from a VEGF receptor 2 protein and having an activity of inducing cytotoxic T cells,
- [13] The vaccine of [12], wherein the above-mentioned peptides of (b) include (i) and (ii) below:
- (i) at least one peptide comprising the amino acid sequence of any one of SEQ ID NOs: 5 to 17; and
 - (ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 5 to 17,
- [14] The vaccine of [13], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:
- (1) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine;
 - (2) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;
 - (3) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;
 - (4) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan;
 - (5) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and
 - (6) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine,
- [15] The vaccine of any one of [9] to [14], wherein the disease caused by neovascularization in the choroid (neovascular maculopathy) is selected from exudative age-related macular degeneration, myopic macular degeneration, angioid streaks, central exudative chorioretinopathy, various retinal pigment epitheliopathy, choroidal atrophy, choroideremia, and choroidal osteoma,
- [16] The vaccine of any one of [9] to [15], which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24,
- [17] A pharmaceutical composition for inhibiting neovascularization in human choroid, comprising as an active ingredient at least one type of the peptides of (a) peptides comprising an amino acid sequence derived from a VEGF receptor 1 protein and having an activity of inducing cytotoxic T cells, or a polynucleotide encoding thereof,
- [18] The pharmaceutical composition of [17], wherein the above-mentioned peptides of (a) include the peptide of (i) and (ii) below:
- (i) at least one peptide comprising any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 1 to 4; and

- (ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 1 to 4,
- [19] The pharmaceutical composition of [18], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:
- (1) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine;
 - (2) a peptide in which the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;
 - (3) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine, and the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;
 - (4) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, tyrosine, methionine, or tryptophan;
 - (5) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and
 - (6) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine,
- [20] The pharmaceutical composition of any one of [17] to [19], wherein the composition further comprises at least one type of the peptides of (b) peptides comprising an amino acid sequence derived from a VEGF receptor 2 protein and having an activity of inducing cytotoxic T cells,
- [21] The pharmaceutical composition of [20], wherein the above-mentioned peptides of (b) include (i) and (ii) below:
- (i) at least one peptide comprising the amino acid sequence of any one of SEQ ID NOs: 5 to 17; and
 - (ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 5 to 17,
- [22] The pharmaceutical composition of [21], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:
- (1) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine;
 - (2) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;
 - (3) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;
 - (4) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan;
 - (5) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and

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- (6) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine,
- [23] The pharmaceutical composition of any one of [15] to [19], which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24,
- [24] A vaccine for inhibiting neovascularization in human choroid, comprising as an active ingredient at least one type of the peptides of (a) peptides comprising an amino acid sequence derived from a VEGF receptor 1 protein and having an activity of inducing cytotoxic T cells, or a polynucleotide encoding thereof,
- [25] The vaccine of [24], wherein the above-mentioned peptides of (a) include the peptide of (i) and (ii) below:
- (i) at least one peptide comprising any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 1 to 4; and
- (ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from group consisting of SEQ ID NOs: 1 to 4,
- [26] The vaccine of [25], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:
- (1) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine;
- (2) a peptide in which the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;
- (3) a peptide in which the second amino acid from the N terminus of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is leucine or methionine, and the C-terminal amino acid of any one of amino acid sequence of SEQ ID NOs: 1 to 3 is valine or leucine;
- (4) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, tyrosine, methionine, or tryptophan;
- (5) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and
- (6) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is phenylalanine, leucine, isoleucine, tryptophan, or methionine,
- [27] The vaccine of any one of [24] to [26], wherein the vaccine further comprises at least one type of the peptides of (b) peptides comprising an amino acid sequence derived from a VEGF receptor 2 protein and having an activity of inducing cytotoxic T cells,
- [28] The vaccine of [27], wherein the above-mentioned peptides of (b) include the peptide of (i) and (ii) below:
- (i) at least one peptide comprising the amino acid sequence of any one of SEQ ID NOs: 5 to 17; and
- (ii) at least one peptide comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in any one of the amino acid sequence selected from the group consisting of SEQ ID NOs: 5 to 17,
- [29] The vaccine of [28], wherein the above-mentioned peptide of (ii) is any one of peptides of (1) to (6) below:

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- (1) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine;
- (2) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;
- (3) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is leucine or methionine and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 11 to 17 is valine or leucine;
- (4) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan;
- (5) a peptide in which the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine; and
- (6) a peptide in which the second amino acid from the N terminus of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, tyrosine, methionine, or tryptophan and the C-terminal amino acid of any one of the amino acid sequence of SEQ ID NOs: 5 to 10 is phenylalanine, leucine, isoleucine, tryptophan, or methionine, and
- [30] The vaccine of any one of [24] to [29], which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24.

Advantageous Effects of Invention

The present invention can provide pharmaceutical compositions and vaccines effective for treating and preventing diseases caused by neovascularization in human choroid (neovascular maculopathy). Furthermore, the present invention can provide pharmaceutical compositions and vaccines effective for inhibiting neovascularization in human choroid.

BRIEF DESCRIPTION OF DRAWINGS

FIG. 1A-1C show the symptomatic relief of an age-related macular degeneration patient HLA-A0201-Case 1 who has been given a VEGFR-1-derived peptide and a VEGFR-2-derived peptide. (A) shows the tomographic images before starting the administration, (B) shows ocular fundus photographs before starting the administration, (C) shows fluorescein fundus photography before starting the administration. The arrows of (A) and (D) indicate the line of the pigment epithelium and of (B) and (E) indicate the detachment of the pigment epithelium.

FIG. 1D-1F show the symptomatic relief of an age-related macular degeneration patient HLA-A0201-Case 1 who has been given a VEGFR-1-derived peptide and a VEGFR-2-derived peptide. (D) shows the tomographic images five months after starting the administration, (E) shows the ocular fundus photograph five months after starting the administration, (F) shows fluorescein fundus photography five months after starting the administration. The arrows of (A) and (D) indicate the line of the pigment epithelium and of (B) and (E) indicate the detachment of the pigment epithelium.

FIG. 2A-2B show retinal tomographic images acquired by optical coherence tomography performed on a single case of an age-related macular degeneration patient HLA-A0201-Case3 who has been given a VEGFR-1-derived peptide and a VEGFR-2-derived peptide. (A) shows the tomographic images before starting the administration and (B) shows the tomographic images one month after starting the administration.

tion. The arrows indicate edema, and the dashed arrow indicates an apparently a fibrosed and hypoactive neovascular membrane.

FIG. 3 shows the symptomatic relief and the recovery of vision of an age-related macular degeneration patient HLA-A2402-Case 1 who has been given a VEGFR-1-derived peptide and a VEGFR-2-derived peptide. Upper photographs show ocular fundus photographs and lower photographs show retinal tomographic images subretinal hemorrhages (arrowhead) disappeared and the vision was improved (parenthetic value) after starting the treatment. Additionally, the anatomy of macular was remaining the same.

FIG. 4a-4b show the VEGFR1 peptide-specific response of HLA-A0201-Case1. The PBMCs of pre-treatment (a), and post-1 course (b) were tested. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A2-770 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (lower left panel) and VEGFR1 peptide-specific spots (lower right panel) is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). Circular mark indicates that spot counts are saturated.

FIG. 4c-4d show the VEGFR1 peptide-specific response of HLA-A0201-Case1. The PBMCs of post-2 courses (c), and post-3 courses (d) were tested. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A2-770 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (lower left panel) and VEGFR1 peptide-specific spots (lower right panel) is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). Circular mark indicates that spot counts are saturated.

FIG. 4e shows the VEGFR1 peptide-specific response of HLA-A0201-Case1. The PBMCs of post-4 courses (e) was tested. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A2-770 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (lower left panel) and VEGFR1 peptide-specific spots (lower right panel) is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). Circular mark indicates that spot counts are saturated.

FIG. 5a-5b show the VEGFR2 peptide-specific response of HLA-A0201-Case1. The PBMCs of pre-treatment (a), and post-1 course (b) were tested. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR2-A2-773 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (lower left panel) and VEGFR2 peptide-specific spots (lower right panel) is indicated in the graphs.

FIG. 5c-5d show the VEGFR2 peptide-specific response of HLA-A0201-Case1. The PBMCs of post-2 courses (c), and post-3 courses (d) were tested. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR2-A2-773 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (lower left panel) and VEGFR2 peptide-specific spots (lower right panel) is indicated in the graphs.

FIG. 5e shows the VEGFR2 peptide-specific response of HLA-A0201-Case1. The PBMCs of post-4 courses (e) was tested. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR2-A2-773 pep-

tide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (lower left panel) and VEGFR2 peptide-specific spots (lower right panel) is indicated in the graphs.

FIG. 6a shows the VEGFR1 peptide-specific response of HLA-A0201-Case3. The responses of the PBMCs of post-1 course (a) is shown as representative results. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A2-770 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (middle left panel) and VEGFR1 peptide-specific spots (middle right panel) is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). The VEGFR1 peptide-specific T cell receptor was detected by HLA-A*0201/VEGFR1 dextramer (lower panel).

FIG. 6b shows the VEGFR1 peptide-specific response of HLA-A0201-Case3. The responses of the PBMCs of post-3 courses (b) is shown as representative results. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A2-770 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (middle left panel) and VEGFR1 peptide-specific spots (middle right panel) is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). The VEGFR1 peptide-specific T cell receptor was detected by HLA-A*0201/VEGFR1 dextramer (lower panel).

FIG. 6c shows the VEGFR1 peptide-specific response of HLA-A0201-Case3. The responses of the PBMCs of post-4 courses (c) is shown as representative results. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A2-770 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (middle left panel) and VEGFR1 peptide-specific spots (middle right panel) is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). The VEGFR1 peptide-specific T cell receptor was detected by HLA-A*0201/VEGFR1 dextramer (lower panel).

FIG. 6d shows the VEGFR1 peptide-specific response of HLA-A0201-Case3. The responses of the PBMCs of post-5 courses (d) is shown as representative results. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A2-770 peptide (upper left panel) or HIV-Env peptide (upper right panel) is shown. R/S; responder/stimulator ratio. The number of spot counts (middle left panel) and VEGFR1 peptide-specific spots (middle right panel) is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). The VEGFR1 peptide-specific T cell receptor was detected by HLA-A*0201/VEGFR1 dextramer (lower panel).

FIG. 7a-7c show the VEGFR2 peptide-specific response of HLA-A0201-Case3. The PBMCs of pre-treatment (a), post-1 course (b), and post-3 courses (c) were tested. In each figure, the number of spot counts against VEGFR2-A2-773 peptide-pulsed TISI or HIV-Env peptide-pulsed TISI (left panel) and VEGFR2 peptide-specific spots (right panel) is indicated in the graphs.

FIG. 7d-7e show the VEGFR2 peptide-specific response of HLA-A0201-Case3. The PBMCs of post-4 courses (d) and post-5 courses (e) were tested. In each figure, the number of spot counts against VEGFR2-A2-773 peptide-pulsed TISI or

HIV-Env peptide-pulsed TISI (left panel) and VEGFR2 peptide-specific spots (right panel) is indicated in the graphs.

FIG. 8a-8b show the VEGFR1 peptide-specific response of HLA-A2402-Cas1. The responses of the PBMCs of post-2 course (a) and post-6 courses (b) are shown as representative results. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR1-A24-1084 peptide (left panel) or HIV-Env peptide (right panel) is shown. R/S; responder/stimulator ratio. The number of VEGFR1 peptide-specific spots is indicated in the graphs. Statistical analysis was performed using unpaired Student's t-test (Star mark; $P < 0.05$). Circular mark indicates that spot counts are saturated.

FIG. 9a-9b show the VEGFR2 peptide-specific response of HLA-A2402-Cas1. The responses of the PBMCs of post-2 course (a) and post-6 courses (b) are shown as representative results. In each figure, the photograph of ELISPOT plate in which the PBMCs were stimulated by VEGFR2-A24-169 peptide (left panel) or HIV-Env peptide (right panel) is shown. R/S; responder/stimulator ratio. The number of VEGFR2 peptide-specific spots was indicated in the graphs.

FIG. 10 shows the changes in vision of subjects after treatment. The visions of treatment groups were improved compared to non-treatment group with significant difference (p value=0.015).

DESCRIPTION OF EMBODIMENTS

Definitions

The words “a”, “an”, and “the” as used herein mean “at least one” unless otherwise specifically indicated.

The terms “polypeptide”, “peptide” and “protein” are used interchangeably herein to refer to a polymer of amino acid residues. The terms apply to amino acid polymers in which one or more amino acid residue(s) may be modified residue(s), or non-naturally occurring residue(s), such as artificial chemical mimetic(s) of corresponding naturally occurring amino acid(s), as well as to naturally occurring amino acid polymers.

The term “amino acid” as used herein refers to naturally occurring and synthetic amino acids, as well as amino acid analogs and amino acid mimetics that similarly function to the naturally occurring amino acids. Amino acid may be either L-amino acids or D-amino acids. Naturally occurring amino acids are those encoded by the genetic code, as well as those modified after translation in cells (e.g., hydroxyproline, gamma-carboxyglutamate, and O-phosphoserine). The phrase “amino acid analog” refers to compounds that have the same basic chemical structure (an alpha carbon bound to a hydrogen, a carboxy group, an amino group, and an R group) as a naturally occurring amino acid but have one or more modified R group(s) or modified backbones (e.g., homoserine, norleucine, methionine, sulfoxide, methionine methyl sulfonium). The phrase “amino acid mimetic” refers to chemical compounds that have different structures but similar functions to general amino acids.

Amino acids may be referred to herein by their commonly known three letter symbols or the one-letter symbols recommended by the IUPAC-IUB Biochemical Nomenclature Commission.

The terms “gene”, “polynucleotides”, “nucleotides” and “nucleic acids” are used interchangeably herein and, unless otherwise specifically indicated are referred to by their commonly accepted single-letter codes.

The term “composition” as used herein is intended to encompass a product including the specified ingredients in

the specified amounts, as well as any product that results, directly or indirectly, from combination of the specified ingredients in the specified amounts. Such term in relation to “pharmaceutical composition”, is intended to encompass a product including the active ingredient(s), and any inert ingredient(s) that make up the carrier, as well as any product that results, directly or indirectly, from combination, complexation or aggregation of any two or more of the ingredients, or from dissociation of one or more of the ingredients, or from other types of reactions or interactions of one or more of the ingredients. Accordingly, in the context of the present invention, the phrase “pharmaceutical composition” encompasses any composition made by admixing a compound of the present invention and a pharmaceutically or physiologically acceptable carrier. The phrase “pharmaceutically acceptable carrier” or “physiologically acceptable carrier”, as used herein, means a pharmaceutically or physiologically acceptable material, composition, substance or vehicle, including but not limited to, a liquid or solid filler, diluent, excipient, solvent or encapsulating material, involved in carrying or transporting the active ingredient(s) from one organ, or portion of the body, to another organ, or portion of the body.

Unless otherwise defined, the terms “cytotoxic T lymphocyte”, “cytotoxic T cell” and “CTL” are used interchangeably herein and unless otherwise specifically indicated, refer to a sub-group of T lymphocytes that are capable of recognizing non-self cells (e.g., virus-infected cells) and inducing the death of such cells.

Unless otherwise defined, the terms “HLA-A24” refers to the HLA-A24 type containing the subtypes such as HLA-A*2402.

Unless otherwise defined, the term “HLA-A02”, as used herein, representatively refers to the subtypes such as HLA-A*0201.

Unless otherwise defined, the term “kit” as used herein, is used in reference to a combination of reagents and other materials. It is not intended that the term “kit” be limited to a particular combination of agents and/or materials.

To the extent that the methods and compositions of the present invention find utility in the context of the “treatment” of disease caused by neovascularization in human choroid (neovascular maculopathy), a treatment is deemed “efficacious” if it leads to clinical benefit such as, decrease in the detachment of pigment epithelium, amelioration of the detachment of pigment epithelium, reduced leakage, or amelioration of distortion in the subject. Efficaciousness is determined in association with any known method for treating the disease caused by neovascularization in human choroid (neovascular maculopathy).

Unless otherwise defined, all technical and scientific terms used herein have the same meaning as commonly understood by one of ordinary skill in the art to which the present invention belongs.

The present invention relates to pharmaceutical compositions for treating and/or preventing a disease caused by neovascularization in the choroid (neovascular maculopathy) and pharmaceutical compositions for inhibiting neovascularization in the choroid, which comprise as an active ingredient a peptide comprising an amino acid sequence derived from a VEGFR-1 protein and having an activity of inducing cytotoxic T cells (hereinafter referred to as “VEGFR-1 peptide”) (hereinafter, the composition may together be referred to as “pharmaceutical composition of the present invention”) and/or a polynucleotide encoding thereof. Furthermore, the present invention relates to vaccines for treating and/or preventing a disease caused by neovascularization in the choroid (neovascular maculopathy), and vaccines for inhibiting

neovascularization in the choroid, which comprise VEGFR-1 (hereinafter, the vaccine may together be referred to as "vaccine of the present invention") and/or a polynucleotide encoding thereof. The pharmaceutical composition and vaccine above can comprise any other substances, for example immune stimulators. Preferably, a peptide comprising an amino acid sequence derived from other protein and having an activity of inducing cytotoxic T cells can be comprised. More preferably, a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells (hereinafter referred to as "VEGFR-2 peptide"). The present invention is based on the present inventors' finding that pharmaceutical compositions/vaccines comprising VEGFR-1 peptide are effective for inhibiting neovascularization in the choroid.

VEGFR-1 Peptide

The VEGFR-1 peptide contained in the pharmaceutical compositions and vaccines of the present invention (hereinafter, "VEGFR-1 peptide" may be referred to as "peptide of the present invention") can be obtained by synthesizing peptides from any position in the amino acid sequence of a known VEGFR-1 protein. The present invention can contain VEGFR-2 peptide and also can be obtained by synthesizing peptides from any position in the amino acid sequence of a known VEGFR-2. Amino acid sequences of human VEGFR-1 and human VEGFR-2 are known, and those skilled in the art can easily obtain them from protein sequence databases and such available on the Internet. An example of the amino acid sequence of a human VEGFR-1 protein is the amino acid sequence of SEQ ID NO: 19 (the amino acid sequence encoded by the nucleotide sequence of GenBank Accession No. NM_002019). An example of the amino acid sequence of a human VEGFR-2 protein is the amino acid sequence of SEQ ID NO: 21 (the amino acid sequence encoded by the nucleotide sequence of GenBank Accession No. NM_002253).

Peptide synthesis can be performed according to methods conventionally used in peptide chemistry. Conventional synthesis methods are described in documents such as "Peptide Synthesis", Interscience, New York, 1966; "The Proteins", Vol. 2, Academic Press Inc., New York, 1976; "Peptide Synthesis (Peptide Gosei)", Maruzen, 1975; "Fundamentals and Experiments of Peptide Synthesis (Peptide Gosei no Kiso to Jikken)", Maruzen, 1985; and "The sequel of Development of Pharmaceuticals (Zoku Iyakuin no Kaihatsu)", Vol. 14, Peptide Synthesis (Peptide Gosei), Hirokawa Shoten, 1991, and in publications such as International Publication No. WO 99/67288. Peptides of the present invention may also be synthesized by known genetic engineering methods. The following is an example of a genetic engineering synthesis method. A vector into which a DNA encoding a peptide of the present invention has been inserted is introduced into suitable host cells to produce transformed cells. The peptides of the present invention can be obtained by collecting the peptides produced in these transformed cells. The peptides of the present invention may also be produced initially as a fusion protein, which is then cleaved using an appropriate protease to obtain the peptides.

In a method for preparing a fusion protein, a polynucleotide encoding a peptide of the present invention may be ligated in frame with a polynucleotide encoding another peptide, and this may be inserted into an expression vector for expression in a host. Techniques known to those skilled in the art can be used for this purpose. For peptides fused with the peptides of the present invention, one may use known peptides such as FLAG (Hopp, T. P. et al., BioTechnology (1988) 6, 1204-1210), 6× His consisting of six histidine (His) resi-

dues, 10× His, influenza hemagglutinin (HA), human c-myc fragments, VSV-GP fragments, p 18HIV fragments, T7-tag, HSV-tag, E-tag, SV40T antigen fragments, lck tag, alpha-tubulin fragments, B-tag, and Protein C fragments. It is also possible to ligate the peptides of the present invention to glutathione-S-transferase (GST), influenza hemagglutinin (HA), immunoglobulin constant regions, beta-galactosidase, maltose-binding protein (MBP), or such to produce the fusion proteins. The peptides of the present invention can be obtained by treating the fusion proteins produced in this manner with a suitable protease, and then collecting the peptides of interest. The peptides can be collected by methods known to those skilled in the art, such as affinity chromatography.

As an amino acid sequence of a peptide of the present invention, for example, any sequence can be selected from the whole amino acid sequence of a VEGFR-1 protein or the whole amino acid sequence of a VEGFR-2 protein using binding affinity to HLA antigens as an indicator. Binding affinity to HLA antigens can be measured by isolating cells having HLA antigens on the cell surface, such as dendritic cells, and measuring binding of the peptides to the cells using commonly performed methods. Alternatively, binding affinity can be calculated in silico by software recently available on the Internet, such as those described in Parker K. C., J. Immunol. 152, 1994. When applied to the Japanese, for example, A-24 type, A-02 type, or such, which are said to be frequently expressed in the Japanese population, is preferably used as an HLA antigen to obtain effective results. HLA antigens such as the A-02 and A-24 types each include subtypes such as A-0201 or A-2402. Examples of VEGFR-1 peptides having high binding affinity to HLA-A*0201 include peptides comprising the amino acid sequences of SEQ ID NOs: 1 to 3, and examples of VEGFR-1 peptides having high binding affinity to HLA-A*2402 include peptides comprising the amino acid sequence of SEQ ID NO: 4 (WO 2006/093030). Examples of VEGFR-2 peptides having high binding affinity to HLA-A*0201 include peptides comprising the amino acid sequences of SEQ ID NOs: 11 to 17, and examples of VEGFR-2 peptides having high binding affinity to HLA-A*2402 include peptides comprising the amino acid sequences of SEQ ID NOs: 5 to 10 (WO 2004/024766). In clinical practice, peptides having high binding affinity to an HLA antigen carried by a patient requiring treatment can be suitably selected by investigating the type of the HLA antigen in advance.

Peptides having high binding affinity to an HLA antigen are highly likely to be effective as peptides having an activity to induce cytotoxic T cells (CTLs). Still, it is desirable to examine whether or not the candidate peptide selected using the presence of high binding affinity as an indicator actually has an activity to induce CTLs. The CTL-inducing activity can be confirmed by stimulating antigen-presenting cells comprising human MHC antigens (such as B-lymphocytes, macrophages, and dendritic cells), preferably dendritic cells derived from human peripheral blood mononuclear cells, with the candidate peptide; mixing the cells with CD8-positive cells; and then measuring cytotoxicity against the target cells. As the reaction system, transgenic animals produced to express a human HLA antigen (for example, those described in Hum. Immunol. 2000 August; 61(8):764-79 Related Articles, Books, Linkout Induction of CTL response by a minimal epitope vaccine in HLA A*0201/DR1 transgenic mice: dependence on HLA class II restricted T(H) response., Ben Mohamed L., Krishnan R., Longmate J., Auge C., Low L., Primus J., Diamond D J.) may be used. Cytotoxicity can be calculated from the radioactivity released from target cells which are radiolabeled with, for example, ⁵¹Cr or such. Alter-

natively, the activity can be examined by measuring the IFN-gamma produced and released by CTLs in the presence of antigen-presenting cells that carry peptides, and visualizing the inhibition zone on the media using anti-IFN-gamma monoclonal antibodies.

The length of the peptides of the present invention is not particularly limited as long as they have CTL-inducing activity, but is preferably 50 amino acids or less, more preferably 30 amino acids or less, and even more preferably 15 amino acids or less. For example, when presented on antigen-presenting cells in vivo, various proteins are degraded to 9-mer peptides (nonapeptides) and are then presented. Therefore, the peptides of the present invention are desirably 9-mers (nonapeptides) or 10-mers (decapeptides). Preferred VEGFR-1 peptides include peptides comprising the amino acid sequences of SEQ ID NOs: 1 to 4 (WO 2006/093030). Preferred VEGFR-2 peptides include peptides comprising the amino acid sequences of SEQ ID NOs: 5 to 17 (WO 2004/024766).

Furthermore, one, two, or several amino acids can be substituted, deleted, added, and/or inserted to the amino acid sequences of partial peptides of naturally occurring VEGFR-1 or VEGFR-2. Herein, "several" means five or less, and preferably three or less. When modifying amino acid residues, it is desirable to substitute with amino acids in which the properties of the amino acid side chains are maintained. Examples of amino acid side chain properties are: hydrophobic amino acids (A, I, L, M, F, P, W, Y, and V); hydrophilic amino acids (R, D, N, C, E, Q, G, H, K, S, and T); amino acids comprising aliphatic side chains (G, A, V, L, I, and P); amino acids comprising hydroxyl group-containing side chains (S, T, and Y); amino acids comprising sulfur atom-containing side chains (C and M); amino acids comprising carboxylic acid- and amide-containing side chains (D, N, E, and Q); amino acids comprising basic side chains (R, K, and H); and amino acids comprising aromatic group-containing side chains (H, F, Y, and W) (all amino acids are represented by one-letter codes in parentheses). Amino acid substitution within each of these groups is generally called conservative substitution. A peptide comprising a modified amino acid sequence, in which one or more amino acid residues are substituted, deleted, added, and/or inserted to a certain amino acid sequence, is known to retain the biological activity of its original peptide (Mark, D. F. et al., *Proc. Natl. Acad. Sci. USA* (1984) 81, 5662-6; Zoller, M. J. and Smith, M., *Nucleic Acids Res.* (1982) 10, 6487-500; Wang, A. et al., *Science* (1984) 224: 1431-3; Dalbadie-McFarland, G. et al., *Proc. Natl. Acad. Sci. USA* (1982) 79: 6409-13). Preferred examples of such modified VEGFR-1 peptides include peptides comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in the amino acid sequence of any one of SEQ ID NOs: 1 to 4. Preferred examples of modified VEGFR-2 peptides include peptides comprising an amino acid sequence with one or more amino acid substitutions, deletions, additions, and/or insertions in the amino acid sequence of any one of SEQ ID NOs: 5 to 17.

Furthermore, since the regularity of sequences of peptides displayed by binding to HLA antigens is already known (J. Immunol., 152:3913, 1994; Immunogenetics, 41:178, 1995; J. Immunol., 155:4307, 1994), sequences having such regularity can be selected, or modifications based on this regularity can be carried out on the peptides obtained as described above. For example, those with high HLA-24 binding affinity are known to be peptides in which the second amino acid from the peptide N terminus is phenylalanine, tyrosine, methionine, or tryptophan, and the C-terminal amino acid is pheny-

lalanine, leucine, isoleucine, tryptophan, or methionine. Therefore, for peptides to be contained in the pharmaceutical compositions or vaccines for administration to subjects carrying the HLA-24-type HLA antigen, one can select peptides in which the second amino acid from the N terminus is phenylalanine, tyrosine, methionine, or tryptophan, and/or the C-terminal amino acid is phenylalanine, leucine, isoleucine, tryptophan, or methionine. Alternatively, the second amino acid from the N terminus of an obtained peptide can be modified to phenylalanine, tyrosine, methionine, or tryptophan, or the C-terminal amino acid can be modified to phenylalanine, leucine, isoleucine, tryptophan, or methionine. Preferred examples of such VEGFR-1 peptides include peptides in which the second amino acid from the N terminus is modified to phenylalanine, tyrosine, methionine, or tryptophan, and/or the C-terminal amino acid is modified to phenylalanine, leucine, isoleucine, tryptophan, or methionine in the amino acid sequence of SEQ ID NO: 4.

Furthermore, preferred examples of such VEGFR-2 peptides include peptides in which the second amino acid from the N terminus is modified to phenylalanine, tyrosine, methionine, or tryptophan, and/or the C-terminal amino acid is modified to phenylalanine, leucine, isoleucine, tryptophan, or methionine in the amino acid sequence of any one of SEQ ID NOs: 5 to 10. Meanwhile, those with high HLA-02 binding affinity are known to be peptides in which the second amino acid from the peptide N terminus is leucine or methionine, and the C-terminal amino acid is valine or leucine. Therefore, as the peptides to be contained in the pharmaceutical compositions or vaccines for administration to subjects carrying the HLA-02-type HLA antigen, one can select peptides in which the second amino acid from the N terminus is leucine or methionine, and/or the C-terminal amino acid is valine or leucine. Alternatively, the second amino acid from the N terminus of the obtained peptide can be modified to leucine or methionine, and the C-terminal amino acid can be modified to valine or leucine. Preferred examples of such VEGFR-1 peptides include peptides in which the second amino acid from the N terminus is modified to leucine or methionine and/or the C-terminal amino acid is modified to valine or leucine in the amino acid sequence of any one of SEQ ID NOs: 1 to 3. An example of modified VEGFR-2 peptides for the HLA-02 type is a peptide comprising the amino acid sequence of SEQ ID NO: 11-17.

Peptides of the present invention can be obtained as described above, but when a peptide sequence is identical to a portion of the amino acid sequence of an endogenous or exogenous protein with a different function, it may cause side effects such as autoimmune diseases or allergic symptoms against specific substances. Therefore, it is preferable to use available databases to carry out homology searches, and examine whether the sequence of the obtained peptide matches the amino acid sequence of other proteins. If the peptide sequence matches the amino acid sequence of another protein, selection of that peptide sequence should preferably be avoided. If homology search shows that no peptides differing in one or two amino acids exist, the above-mentioned amino acid sequence modifications for increasing the binding affinity to HLA antigens and/or the CTL-inducing activity would not cause those problems.

Polynucleotides

The present invention also provides polynucleotides which encode any of the afore-mentioned peptides of the present invention. These include polynucleotides derived from the natural occurring VEGFR-1 gene (GenBank Accession No. NM_002019 (for example, SEQ ID NO: 18)), or VEGFR-2 gene (GenBank Accession No. NM_002253 (for example,

SEQ ID NO: 20)) as well as those having a conservatively modified nucleotide sequences thereof. Herein, the phrase “conservatively modified nucleotide sequence” refers to sequences which encode identical or essentially identical amino acid sequences. Due to the degeneracy of the genetic code, a large number of functionally identical nucleic acids encode any given protein. For instance, the codons GCA, GCC, GCG, and GCU all encode the amino acid alanine. Thus, at every position where an alanine is specified by a codon, the codon may be altered to any of the corresponding codons described without altering the encoded polypeptide. Such nucleic acid variations are “silent variations,” which are one species of conservatively modified variations. Every nucleic acid sequence herein which encodes a peptide also describes every possible silent variation of the nucleic acid. One of skill in the art will recognize that each codon in a nucleic acid (except AUG, which is ordinarily the only codon for methionine, and TGG, which is ordinarily the only codon for tryptophan) may be modified to yield a functionally identical molecule. Accordingly, each silent variation of a nucleic acid that encodes a peptide is implicitly described in each disclosed sequence.

The polynucleotide of the present invention may be composed of DNA, RNA, or derivatives thereof. As is well known in the art, a DNA molecule is composed of bases such as the naturally occurring bases A, T, C, and G, and T is replaced by U in an RNA. One of skill will recognize that non-naturally occurring bases be included in polynucleotides, as well.

The polynucleotide of the present invention may encode multiple peptides of the present invention with or without intervening amino acid sequences. For example, the intervening amino acid sequence may provide a cleavage site (e.g., enzyme recognition sequence) of the polynucleotide or the translated peptides. Furthermore, the polynucleotide may include any additional sequences to the coding sequence encoding the peptide of the present invention. For example, the polynucleotide may be a recombinant polynucleotide that includes regulatory sequences required for the expression of the peptide or may be an expression vector (plasmid) with marker genes and such. In general, such recombinant polynucleotides may be prepared by the manipulation of polynucleotides through conventional recombinant techniques using, for example, polymerases and endonucleases.

Both recombinant and chemical synthesis techniques may be used to produce the polynucleotides of the present invention. For example, a polynucleotide may be produced by insertion into an appropriate vector, which may be expressed when transfected into a competent cell. Alternatively, a polynucleotide may be amplified using PCR techniques or expression in suitable hosts (see, e.g., Sambrook et al., *Molecular Cloning: A Laboratory Manual*, Cold Spring Harbor Laboratory, New York, 1989). Alternatively, a polynucleotide may be synthesized using the solid phase techniques, as described in Beaucage S L & Iyer R P, *Tetrahedron* 1992, 48: 2223-311; Matthes et al., *EMBO J* 1984, 3: 801-5.

Pharmaceutical Compositions and Vaccines Comprising VEGFR-1 Peptide and/or a Polynucleotide Encoding Thereof

The present invention provides pharmaceutical compositions for treating and/or preventing a disease caused by neovascularization in human choroid, comprising at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof as an active ingredient.

Treatment in the present invention refers to reducing symptoms characteristic of diseases caused by neovascularization in the choroid in patients who have actually developed the symptoms. In the present invention, the degree of reduction is not particularly limited, and as long as the symptoms can be

reduced, even if the degree is very slight, it is included in the meaning of the treatment of the present invention. In the present invention, prevention means suppressing in advance the progress of symptoms characteristic of diseases caused by neovascularization in the choroid. In the present invention, the degree of suppression of the progress is not limited in any way, and as long as the progress can be suppressed, even if the degree is very slight, it is included in the meaning of prevention of the present invention. The symptoms of a disease caused by neovascularization in the choroid include reduced vision. Assessment of whether or not this symptom has been reduced can be determined by a vision test. Furthermore, one can determine whether or not the progress of symptoms is suppressed by evaluating the activity of choroidal neovessels through examinations using fluorescein fundus photography or optical coherence tomography.

Furthermore, the present invention provides vaccines for treating and/or preventing a disease caused by neovascularization in the choroid, comprising at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof as an active ingredient. In the present invention, a vaccine refers to a composition which, when administered to an organism, can induce immune responses in vivo in that organism. In the present invention, immune responses induced in vivo refer to, in particular, induction of CTLs targeting cells expressing VEGFR-1. Since vascular endothelial cells involved in neovascularization in the choroid express VEGFR-1 on the cell surface, they may become targets of CTLs induced by administration of this vaccine. That is, administration of the vaccine of the present invention causes the peptides of the present invention to be presented at high density on the HLA antigens of the antigen-presenting cells, this induces CTLs which react specifically to the complex formed between the presented peptide and HLA antigen, and the power to attack vascular endothelial cells in the choroid is increased. Alternatively, antigen-presenting cells having peptides of the present invention on their cell surface are obtained by extracting dendritic cells from a patient and stimulating them with the peptides of the present invention. Returning the cells to the patient through administration causes CTL induction in the patient, and the power to attack vascular endothelial cells in the choroid can be increased.

The pharmaceutical compositions and vaccines of the present invention are effective against diseases caused by neovascularization in the choroid. There is no limitation on the target diseases of the pharmaceutical compositions and vaccines of the present invention, as long as they are diseases caused by choroid neovascularization. Preferably, the diseases include neovascular maculopathy that associate with diseases such as exudative age-related macular degeneration, myopic macular degeneration, angioid streaks, central exudative chorioretinopathy, various retinal pigment epitheliopathies, choroidal atrophy, choroideremia, and choroidal osteoma. A particularly preferred example is exudative age-related macular degeneration. The pharmaceutical compositions and vaccines of the present invention selectively attack vascular endothelial cells and thus have a low risk of rapid visual reduction and development of severe complications post-treatment, which are problems in conventional therapeutic methods. Therefore, the pharmaceutical compositions of the present invention can be applied not only to patients with severe symptoms but also to early-stage patients with relatively good vision. Since retinal damage is low in early-stage cases with relatively good vision, the visual prognosis post-treatment for advanced cases is expected to be much more favorable than in conventional treatment. Furthermore, pharmaceutical compositions and vaccines of the present inven-

tion have been confirmed to show effects in cases that do not respond to conventional therapeutic methods, and can be applied to such cases.

The present invention is based on the finding that neovascularization in the choroid is inhibited by administration of VEGFR-1 peptides. Therefore, the present invention provides pharmaceutical compositions for inhibiting neovascularization in the choroid, comprising at least one type each of a VEGFR-1 peptide and/or a polynucleotide encoding thereof. Furthermore, pharmaceutical compositions comprising VEGFR-1 peptides and/or a polynucleotide encoding thereof can be used as vaccines. Therefore, the present invention also provides vaccines for inhibiting neovascularization in the choroid, comprising at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof. The degree of inhibition is not particularly limited, and as long as neovascularization can be inhibited, even if the degree is slight, it is included in the meaning of inhibition.

The pharmaceutical compositions and vaccines of the present invention are not particularly limited so long as they contain at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof, and for example, they may comprise multiple types of VEGFR-1 peptides and/or any other substances, for example immune stimulators. Preferably, a peptide comprising an amino acid sequence derived from other protein and having an activity of inducing cytotoxic T cells can be comprised. More preferably, a peptide comprising an amino acid sequence derived from a VEGFR-2 protein and having an activity of inducing cytotoxic T cells (hereinafter referred to as "VEGFR-2 peptide"). The pharmaceutical compositions and vaccines of the present invention may contain, in addition to peptides, carriers, excipients, and such commonly used for pharmaceuticals when appropriate. For example, they may be used parenterally in the injectable form of sterile solutions or suspensions prepared with water or other pharmaceutically acceptable liquids. They may be formulated by appropriately combining them with pharmaceutically acceptable carriers or vehicles, more specifically, sterilized water or physiological saline solutions, vegetable oils, emulsifiers, suspending agents, surfactants, stabilizers, flavoring agents, excipients, vehicles, preservatives, binding agents, and such, and mixing them at a unit dosage form required by generally accepted pharmaceutical practice. The amount of active ingredient in these formulations is included to achieve appropriate doses within specified limit.

When the present invention is a vaccine, it may include an adjuvant so that cellular immunity is effectively established, and they may also include other active ingredients for neovascular maculopathy and such. They may also be made into particulate formulations. For adjuvants, those described in the document (Johnson A G., Clin. Microbiol. Rev., 7:277-289, 1994) or such are available. Other formulations may be liposome preparations, granular preparations produced by binding to micrometer-diameter beads, or lipid-bound preparations.

The amount of VEGFR-1 peptide contained in the pharmaceutical compositions and vaccines of the present invention is not particularly limited as long as it is a pharmaceutically effective amount. For example, an effective amount of each peptide may be 0.001 mg to 1000 mg, preferably 0.001 mg to 1000 mg, and more preferably 0.1 mg to 10 mg. Furthermore, if the pharmaceutical compositions and vaccines contain VEGFR-2 peptide, the combining ratio of the VEGFR-1 peptide to the VEGFR-2 peptide is not particularly limited, as long as pharmaceutically effective amounts of both peptides are contained. The amounts of VEGFR-1 peptide and VEGFR-2 peptide combined may be the same, or the amount of either one of the peptides combined may be greater than the other peptide. While VEGFR-2 is expressed on the surface of almost all vascular endothelial cells, VEGFR-1 is

expressed only on the surface of a specific portion of vascular endothelial cells; therefore, the amount of the VEGFR-2 peptide combined can be greater than that of the VEGFR-1 peptide.

In another embodiment of the present invention, the peptides of the present invention may also be administered in the form of a pharmaceutically acceptable salt. Preferable examples of the salts include salts with an alkali metal, salts with a metal, salts with an organic base, salts with an organic acid and salts with an inorganic acid.

The present invention also includes the use of VEGFR-1 peptide and/or a polynucleotide encoding thereof in manufacturing pharmaceutical compositions or vaccines for treating and/or preventing diseases caused by neovascularization in human choroid. Furthermore, the present invention includes the use of VEGFR-1 peptide and/or a polynucleotide encoding thereof in manufacturing pharmaceutical compositions or vaccines for inhibiting neovascularization in human choroid.

The present invention includes VEGFR-1 peptides and/or a polynucleotide encoding thereof to be administered to subjects for treating and/or preventing diseases caused by neovascularization in human choroid. In addition, the present invention includes VEGFR-2 peptides and/or a polynucleotide encoding thereof to be administered to subjects together with a VEGFR-1 peptide and/or a polynucleotide encoding thereof for treating and/or preventing diseases caused by neovascularization in human choroid. Furthermore, the present invention includes VEGFR-2 peptides to and/or a polynucleotide encoding thereof be administered to subjects together with a VEGFR-1 peptide and/or a polynucleotide encoding thereof for inhibiting neovascularization in human choroid. Additionally, the present invention includes VEGFR-1 peptides and/or a polynucleotide encoding thereof to be administered to subjects together with a VEGFR-2 peptide and/or a polynucleotide encoding thereof for inhibiting neovascularization in human choroid.

Kits for Treating or Preventing Neovascular Maculopathy and Kits for Inhibiting Neovascularization in the Choroid

The present invention provides kits for treating and/or preventing diseases caused by neovascularization in the choroid, comprising at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof. The present invention also provides kits for inhibiting neovascularization in the choroid, comprising at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof.

The VEGFR-1 peptide to be included in the kits of the present invention may be present individually alone, or they may exist in the form of formulations or vaccines by appropriately combining with pharmaceutically acceptable carriers or vehicles, or more specifically, sterilized water or physiological saline solutions, vegetable oils, emulsifiers, suspending agents, surfactants, stabilizers, flavoring agents, excipients, vehicles, preservatives, binding agents, and such. When they are produced into vaccines, an adjuvant may be included so that cellular immunity is effectively established, and other active ingredients for neovascular maculopathy and such may also be included. Preferably, VEGFR-2 peptide can be included. They may also be made into granular formulations. For adjuvants, those described in the document (Johnson A G., Clin. Microbiol. Rev., 7:277-289, 1994) or such are available. Other formulations may be liposome preparations, granular preparations produced by binding to micrometer-diameter beads, or lipid-bound preparations.

The kits of the present invention may further include pharmaceutically acceptable carriers or vehicles such as those described above so that one who prepares the pharmaceuticals can make appropriate adjustments.

Methods for Treating or Preventing Neovascular Maculopathy, and Methods for Inhibiting Neovascularization in the Choroid

The present invention further provides methods for treating and/or preventing diseases caused by neovascularization in the choroid, comprising the step of administering to a subject at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof. Furthermore, the present invention provides methods for inhibiting neovascularization in the choroid, comprising the step of administering to a subject at least a VEGFR-1 peptide and/or a polynucleotide encoding thereof.

VEGFR-1 peptide can be administered to subjects parenterally in the injectable form of sterile solutions or suspensions prepared with water or other pharmaceutically acceptable liquids. They may also be administered to subjects in the form of a formulation by appropriately combining with pharmaceutically acceptable carriers or vehicles, more specifically, sterilized water or physiological saline solutions, vegetable oils, emulsifiers, suspending agents, surfactants, stabilizers, flavoring agents, excipients, vehicles, preservatives, binding agents, and such, and mixing them at a unit dosage form required for generally accepted pharmaceutical practice. When administering VEGFR-1 peptide as vaccines, they may be administered together with an adjuvant so that cellular immunity is effectively established, and they may also be administered together with other active ingredients for neovascular maculopathy and such. For adjuvants, those described in the document (Johnson A G., Clin. Microbiol. Rev., 7:277-289, 1994) or such are available. VEGFR-2 peptide may also be administered together.

Those skilled in the art can suitably plan the method of administration, dose, and period of administration of VEGFR-1 according to the symptoms of patients (subjects) needing administration of the peptides of the present invention. The VEGFR-1 peptide can be administered to subjects as pharmaceutical compositions or vaccines of the present invention, or they may be administered to subjects as pharmaceutical compositions or vaccines containing each of the peptides individually. The VEGFR-1 peptide can be administered by either systemic administration or local administration. Examples of systemic administration include oral administration, intradermal administration, subcutaneous administration, and intravenous injection. Examples of local administration include administration to the vicinity of the choroid.

The dose of VEGFR-1 peptide may be, for example, 0.001 mg to 1000 mg, preferably 0.001 mg to 1000 mg, and more preferably 0.1 mg to 10 mg, but is not limited thereto. Furthermore, without limitation, the vaccines are preferably administered once in a few days or a few months, and more preferably once a week.

EXAMPLES

Hereinbelow, the present invention will be specifically described with reference to the Examples, but it is not to be construed as being limited thereto.

Example 1

Subjects

HLA-A0201-Case 1

As a subject, a 67-year old male patient with age-related macular degeneration who has been treated by photodynamic therapy and Avastin administration was selected. It is a case that did not go to remission by conventional therapeutic methods. Examination of the HLA-A locus confirmed that the subject carries HLA-A*0201.

HLA-A0201-Case 3

As a subject, a 76-year old male patient with age-related macular degeneration who has been treated by injection of a steroid (triamcinolone) below Tenon's capsule, photodynamic therapy, and Avastin administration was selected. It is a case that did not go to remission by conventional therapeutic methods. Examination of the HLA-A locus confirmed that the subject carries HLA-A*0201.

HLA-A2402-Case 1

As a subject, a 67-year old male patient with a age-related macular degeneration patient was selected. It is a case that did not go to remission by conventional therapeutic methods. Examination of the HLA-A locus confirmed that the subject carries HLA-A*2402.

Peptides

HLA-A*2402 restricted VEGFR1 peptide (VEGFR1-A24-1084; SYGVLLWEI; SEQ ID NO:4), HLA-A*2402 restricted VEGFR2 peptide (VEGFR2-A24-169; RFVP-DGNRI; SEQ ID NO:8), HLA-A*0201 restricted VEGFR1 peptide (VEGFR1-A2-770; TLFWLLLT; SEQ ID NO: 2) and HLA-A*0201 restricted VEGFR2 peptide (VEGFR2-A2-773; VIAMFFWLL; SEQ ID NO: 12) of Good Manufacturing Practice (GMP) grade, HLA-A*2402-restricted HIV-Env protein-derived peptide (HIV-A24; RYL RDQQL; SEQ ID NO: 22) and HLA-A*0201-restricted HIV-Env protein-derived peptide (HIV-A2; SLYNTYATL; SEQ ID NO: 23) were synthesized and analyzed the quality by the American Peptide Company Inc. (Sunnyvale, Calif.).

Method of Administration

The GMP grade synthetic peptides, VEGFR-1 peptide (TLFWLLLT; SEQ ID NO: 2) and VEGFR-2 peptide (VIAMFFWLL; SEQ ID NO: 12), were obtained from the Human Genome Center, Institute of Medical Sciences, the University of Tokyo. One milligram each of the VEGFR-1 peptide and the VEGFR-2 peptide was mixed with 1 mL of incomplete Freund's adjuvant (MONTANIDE*ISA51VG, SEPPIC, France), and they were administered subcutaneously to the armpit of the patient. The administration was carried out once a week.

PBMCs

Peripheral blood mononuclear cells (PBMCs) were isolated from patients (HLA-A*2402 or HLA-A*0201 positive) by Ficoll-Plaque (Pharmacia) solution.

IFN-Gamma ELISPOT Assay

Before the treatment and at the every end of treatment course, PBMCs were obtained and immediately frozen. For immune monitoring, all frozen PBMCs derived from each patient were thawed at the same time, and stimulated with 10 micro g/ml of the cognate peptide and 20 IU/mL of interleukine-2 (Chiron, Emeryville, Calif.) at 37 degrees C. with 5% CO₂ condition for two weeks. After the depletion of CD4⁺ cells by Dynal CD4 positive isolation kit (Invitrogen, Carlsbad, Calif.), cells were applied for interferon-gamma (IFN-gamma) enzyme-linked immunospot (ELISPOT) assay. IFN-gamma ELISPOT assay was performed according to manufacture's procedure (BD Biosciences, San Jose, Calif.). Briefly, HLA-A*2402-positive B-lymphoblast TISI cells (IHWG Cell and Gene Bank, Seattle, Wash.) or HLA-A*0201-positive B-lymphoblast T2 cells (ATCC, Tokyo, Japan) were incubated with 20 micro g/ml of the cognate peptide or HIV-Env peptide over night. After washing out the remaining peptide that not bind to HLA on the cells, respective peptide-pulsed cells (2×10⁴ cells/well) were used to stimulate prepared CD4⁺ cells (1×10⁴ cells/well) on 96-well plate (Millipore, Bedford, Mass.) at 37 degrees C. with 5% CO₂ condition over night. The plates were scanned and analyzed on an ImmunoSpot S4 Analyzer and ImmunoSpot

image analyzer software version 5.0 (Cellular Technology Ltd., Cleveland, Ohio). The number of the cognate peptide specific spots was calculated by subtracting the number of spots when stimulated with HIV-Env peptide from the number of spots when stimulated with the cognate peptide. All ELISPOT assays were performed triplicate wells. When the excess spots were detected, it is unable to calculate the accurate spot counts because of the clustering and those wells were defined to be saturated.

Flow Cytometric Analysis

To detect peptide specific T cell receptor, 5×10^5 of CD4⁺ cells prepared for ELISPOT assay were stained with phycoerythrin (PE)-conjugated HLA-A*2402/VEGFR1 dextramer or HLA-A*0201/VEGFR1 dextramer (DAKO Japan, Tokyo, Japan), fluorescein isothiocyanate (FITC)-conjugated anti-human CD8 mAb (RPA-T8, BD Biosciences, San Jose, Calif.) and allophycocyanina (APC)-conjugated anti-human CD3 mAb (UCHT1, BD Biosciences, San Jose, Calif.), then analyzed using FACSCanto II (BD Biosciences, San Jose, Calif.). HLA-A*2402/HIV-Env dextramer or HLA-A*0201/HIV-Env dextramer (DAKO Japan, Tokyo, Japan) were used as negative controls. Dead cells were excluded from the analysis based on the staining with 7-ADD (Sigma-Aldrich Japan, Tokyo, Japan).

Results

HLA-A0201-Case1

The progression stage of age-related macular degeneration was analyzed using optical coherence tomography, fluorescein fundus imaging, and fundus photography. Before starting administration of the VEGFR-1 peptide and the VEGFR-2 peptide, a large detachment of pigment epithelium was observed in the tomographic images of optical coherence tomography (FIG. 1A). Detachment of pigment epithelium was clearly observed also in the fundus photograph (FIG. 1B). Furthermore, a large amount of leakage was observed in the image of fluorescein fundus photography (FIG. 1D).

Five months after starting administration of the VEGFR-1 peptide and the VEGFR-2 peptide, a significant decrease in the detachment of pigment epithelium was observed in the tomographic images of optical coherence tomography (FIG. 1D). Amelioration of the detachment of pigment epithelium was also observed with fundus photography (FIG. 1E). Furthermore, reduced leakage was confirmed in the fluorescein fundus photograph (FIG. 1F). It was also reported that subjective symptoms such as distortion were greatly ameliorated. The vision of the right eye was slightly improved ($R_v = (0.9) \rightarrow R_v = (1.2)$). These results confirmed that administration of the VEGFR-1 peptide and the VEGFR-2 peptide yields amelioration effects for age-related macular degeneration. Problems suggestive of safety issue did not arise.

HLA-A0201-Case3

Before starting administration of the VEGFR-1 peptide and the VEGFR-2 peptide, rupture of the retina due to leakage from the neovessels and edema in the retina were observed in the tomographic images of optical coherence tomography (FIG. 2A). One month after starting administration of the VEGFR-1 peptide and the VEGFR-2 peptide, edema of the retina was clearly found to be reduced compared to before the administration was started (FIG. 2B). Furthermore, an apparently fibrosed and hypoactive neovascular membrane was observed (FIG. 2B). Furthermore, it was reported that subjective symptoms such as distortion were significantly ameliorated. These results confirmed that administration of the VEGFR-1 peptide and the VEGFR-2 peptide yields amelioration effects for the symptoms of age-related macular degeneration in this case as well. Problems suggestive of safety issue did not arise.

HLA-A2402-Case1

Before starting administration of the VEGFR-1 peptide and the VEGFR-2 peptide, clear subretinal hemorrhages were observed in the ocular fundus photographs (FIG. 3, upper left panel). Three month after starting administration, the subretinal hemorrhages were obviously relieved compared with before administration (FIG. 3 upper center and right panels). Furthermore, anatomy of macular region have no effect (FIG. 3, lower panel) and the vision was improved.

Monitoring Analysis

IFN-gamma ELISPOT assay and/or Flow cytometric analysis were performed as monitoring of patient treated.

TABLE 1

Summary of monitoring analysis						
Treatment			CTL response			Multimer analysis CD8 ⁺ R1 dextramer ⁺ / CD3 ⁺ CD4 ⁺ (%)
Dose	Case	course	R1	R2	CMV	
1 mg	HLA-A0201-Case 1	pre-treatment	+++	-	+++	NT
		post-1course	+++	-	+++	NT
		post-2course	+++	-	+++	NT
		post-3course	+++	-	+++	NT
		post-4course	+++	-	+++	NT
25	HLA-A0201-Case 3	pre-treatment	+	+	+++	0.01
		post-1course	+++	-	+++	0.05
		post-2course	NT	NT	NT	NT
		post-3course	+++	-	+++	0.69
		post-4course	+++	-	+++	0.04
		post-5course	+++	-	+++	0.11
30	HLA-A2402-Case 1	pre-treatment	-	-	+++	NT
		post-1course	-	-	+	NT
		post-2course	+++	-	-	NT
		post-3course	++	+	++	NT
		post-4course	+	-	-	NT
		post-5course	+++	++	+++	NT
35		post-6course	++	-	-	NT

NT: not tested

HLA-A0201-Case1

Significantly higher number of spots were observed when stimulated with VEGFR1-A2-770 peptide-pulsed T2 cells compared with that stimulated with HIV-Env peptide-pulsed T2 cells in IFN-gamma ELISPOT assay, especially after treatment courses (Table 1 and FIG. 4). On the other hand, no specific IFN-gamma production was observed by stimulation with VEGFR2-A2-773 peptide (Table 1 and FIG. 5), despite administration of both VEGFR1-A2-770 peptide and VEGFR2-A2-773 peptide shown obvious efficacy in the patient. As a result, it indicated that VEGFR1-A2-770 peptide function to improve the case alone.

HLA-A0201-Case3

Significantly higher number of spots were observed when stimulated with VEGFR1-A2-770 peptide-pulsed T2 cells compared with that stimulated with HIV-Env peptide-pulsed T2 cells in IFN-gamma ELISPOT assay (Table 1 and FIG. 6). Consistently, significant population of HLA-A*0201/VEGFR1-A2-770 dextramer+CD8⁺ cells were detected by flow cytometric analysis (FIG. 6 lower panels). On the other hand, no specific IFN-gamma production was observed by stimulation with VEGFR2-A2-773 peptide (Table 1 and FIG. 7), despite administration of both VEGFR1-A2-770 peptide and VEGFR2-A2-773 peptide shown obvious efficacy in the patient. As a result, it indicated that VEGFR1-A2-770 peptide function to improve the case alone.

HLA-A2402-Case1

Significantly higher number of spots were observed when stimulated with VEGFR1-A24-1084 peptide-pulsed T2 cells compared with that stimulated with HIV-Env peptide-

pulsed TISI cells in IFN-gamma ELISPOT assay, especially after treatment courses (Table 1 and FIG. 8). On the other hand, no specific IFN-gamma production was observed by stimulation with VEGFR2-A24-169 peptide (Table 1 and FIG. 9), despite administration of both VEGFR1-A24-1084 peptide and VEGFR2-A24-169 peptide shown obvious efficacy in the patient. As a result, it indicated that VEGFR1-A24-1084 peptide function to improve the case alone.

Change in Vision After Treatment

The visions of treatment groups were improved with significant difference (p=0.015) (FIG. 10).

INDUSTRIAL APPLICABILITY

The present invention provides pharmaceutical compositions/vaccines for treatment and/or prevention of diseases caused by neovascularization in the choroid (neovascular maculopathy). Conventionally, laser therapy, photodynamic therapy, operative therapy, drug therapy, and such have been performed as therapeutic methods for neovascular maculopa-

thy. However, laser therapy could reduce central vision. There are examples of rapid visual reduction following photodynamic therapy in cases with good vision. In operative therapy, there is a risk of postoperative complications associated with surgical invasion. In drug therapy, there is a risk of serious complications such as endophthalmitis and retinal detachment due to intraocular injection. That is, conventional therapies have a high risk of visual reduction due to treatment-associated adverse effects and complications. Therefore, it was difficult to treat early-stage cases with relatively good vision. Since safety problems did not arise in the administered cases, one can expect the pharmaceutical compositions/vaccines of the present invention to provide low-risk and highly safe therapeutic agents and therapeutic methods for neovascular maculopathy. Furthermore, since they are shown to be effective for cases that do not respond to conventional therapeutic methods, it can be expected that they will provide therapeutic agents and therapeutic methods for cases for which conventional therapeutic methods have not been effective.

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		355					360					365			
Ile	Pro	Leu	Glu	Ser	Asn	His	Thr	Ile	Lys	Ala	Gly	His	Val	Leu	Thr
370						375					380				
Ile	Met	Glu	Val	Ser	Glu	Arg	Asp	Thr	Gly	Asn	Tyr	Thr	Val	Ile	Leu
385					390					395					400
Thr	Asn	Pro	Ile	Ser	Lys	Glu	Lys	Gln	Ser	His	Val	Val	Ser	Leu	Val
				405					410					415	
Val	Tyr	Val	Pro	Pro	Gln	Ile	Gly	Glu	Lys	Ser	Leu	Ile	Ser	Pro	Val
			420					425					430		
Asp	Ser	Tyr	Gln	Tyr	Gly	Thr	Thr	Gln	Thr	Leu	Thr	Cys	Thr	Val	Tyr
		435					440					445			
Ala	Ile	Pro	Pro	Pro	His	His	Ile	His	Trp	Tyr	Trp	Gln	Leu	Glu	Glu
	450					455					460				
Glu	Cys	Ala	Asn	Glu	Pro	Ser	Gln	Ala	Val	Ser	Val	Thr	Asn	Pro	Tyr
465					470					475					480
Pro	Cys	Glu	Glu	Trp	Arg	Ser	Val	Glu	Asp	Phe	Gln	Gly	Gly	Asn	Lys
				485					490					495	
Ile	Glu	Val	Asn	Lys	Asn	Gln	Phe	Ala	Leu	Ile	Glu	Gly	Lys	Asn	Lys
			500					505					510		
Thr	Val	Ser	Thr	Leu	Val	Ile	Gln	Ala	Ala	Asn	Val	Ser	Ala	Leu	Tyr
		515					520					525			
Lys	Cys	Glu	Ala	Val	Asn	Lys	Val	Gly	Arg	Gly	Glu	Arg	Val	Ile	Ser
	530					535					540				
Phe	His	Val	Thr	Arg	Gly	Pro	Glu	Ile	Thr	Leu	Gln	Pro	Asp	Met	Gln
545					550					555					560
Pro	Thr	Glu	Gln	Glu	Ser	Val	Ser	Leu	Trp	Cys	Thr	Ala	Asp	Arg	Ser
				565					570					575	
Thr	Phe	Glu	Asn	Leu	Thr	Trp	Tyr	Lys	Leu	Gly	Pro	Gln	Pro	Leu	Pro
			580					585					590		
Ile	His	Val	Gly	Glu	Leu	Pro	Thr	Pro	Val	Cys	Lys	Asn	Leu	Asp	Thr
		595					600					605			
Leu	Trp	Lys	Leu	Asn	Ala	Thr	Met	Phe	Ser	Asn	Ser	Thr	Asn	Asp	Ile
	610					615						620			
Leu	Ile	Met	Glu	Leu	Lys	Asn	Ala	Ser	Leu	Gln	Asp	Gln	Gly	Asp	Tyr
625					630					635					640
Val	Cys	Leu	Ala	Gln	Asp	Arg	Lys	Thr	Lys	Lys	Arg	His	Cys	Val	Val
				645					650					655	
Arg	Gln	Leu	Thr	Val	Leu	Glu	Arg	Val	Ala	Pro	Thr	Ile	Thr	Gly	Asn
			660					665					670		
Leu	Glu	Asn	Gln	Thr	Thr	Ser	Ile	Gly	Glu	Ser	Ile	Glu	Val	Ser	Cys
		675					680					685			
Thr	Ala	Ser	Gly	Asn	Pro	Pro	Pro	Gln	Ile	Met	Trp	Phe	Lys	Asp	Asn
	690					695					700				

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Glu	Thr	Leu	Val	Glu	Asp	Ser	Gly	Ile	Val	Leu	Lys	Asp	Gly	Asn	Arg	
705					710					715					720	
Asn	Leu	Thr	Ile	Arg	Arg	Val	Arg	Lys	Glu	Asp	Glu	Gly	Leu	Tyr	Thr	
				725					730					735		
Cys	Gln	Ala	Cys	Ser	Val	Leu	Gly	Cys	Ala	Lys	Val	Glu	Ala	Phe	Phe	
			740					745					750			
Ile	Ile	Glu	Gly	Ala	Gln	Glu	Lys	Thr	Asn	Leu	Glu	Ile	Ile	Ile	Leu	
		755					760					765				
Val	Gly	Thr	Ala	Val	Ile	Ala	Met	Phe	Phe	Trp	Leu	Leu	Leu	Val	Ile	
	770					775					780					
Ile	Leu	Arg	Thr	Val	Lys	Arg	Ala	Asn	Gly	Gly	Glu	Leu	Lys	Thr	Gly	
785					790					795					800	
Tyr	Leu	Ser	Ile	Val	Met	Asp	Pro	Asp	Glu	Leu	Pro	Leu	Asp	Glu	His	
				805					810					815		
Cys	Glu	Arg	Leu	Pro	Tyr	Asp	Ala	Ser	Lys	Trp	Glu	Phe	Pro	Arg	Asp	
			820					825					830			
Arg	Leu	Lys	Leu	Gly	Lys	Pro	Leu	Gly	Arg	Gly	Ala	Phe	Gly	Gln	Val	
		835					840					845				
Ile	Glu	Ala	Asp	Ala	Phe	Gly	Ile	Asp	Lys	Thr	Ala	Thr	Cys	Arg	Thr	
	850					855					860					
Val	Ala	Val	Lys	Met	Leu	Lys	Glu	Gly	Ala	Thr	His	Ser	Glu	His	Arg	
865					870					875					880	
Ala	Leu	Met	Ser	Glu	Leu	Lys	Ile	Leu	Ile	His	Ile	Gly	His	His	Leu	
				885					890				895			
Asn	Val	Val	Asn	Leu	Leu	Gly	Ala	Cys	Thr	Lys	Pro	Gly	Gly	Pro	Leu	
			900					905					910			
Met	Val	Ile	Val	Glu	Phe	Cys	Lys	Phe	Gly	Asn	Leu	Ser	Thr	Tyr	Leu	
	915						920					925				
Arg	Ser	Lys	Arg	Asn	Glu	Phe	Val	Pro	Tyr	Lys	Thr	Lys	Gly	Ala	Arg	
	930					935					940					
Phe	Arg	Gln	Gly	Lys	Asp	Tyr	Val	Gly	Ala	Ile	Pro	Val	Asp	Leu	Lys	
945					950					955					960	
Arg	Arg	Leu	Asp	Ser	Ile	Thr	Ser	Ser	Gln	Ser	Ser	Ala	Ser	Ser	Gly	
				965					970					975		
Phe	Val	Glu	Glu	Lys	Ser	Leu	Ser	Asp	Val	Glu	Glu	Glu	Glu	Ala	Pro	
			980					985					990			
Glu	Asp	Leu	Tyr	Lys	Asp	Phe	Leu	Thr	Leu	Glu	His	Leu	Ile	Cys	Tyr	
		995					1000					1005				
Ser	Phe	Gln	Val	Ala	Lys	Gly	Met	Glu	Phe	Leu	Ala	Ser	Arg	Lys		
	1010					1015					1020					
Cys	Ile	His	Arg	Asp	Leu	Ala	Ala	Arg	Asn	Ile	Leu	Leu	Ser	Glu		
	1025					1030					1035					
Lys	Asn	Val	Val	Lys	Ile	Cys	Asp	Phe	Gly	Leu	Ala	Arg	Asp	Ile		
	1040					1045					1050					
Tyr	Lys	Asp	Pro	Asp	Tyr	Val	Arg	Lys	Gly	Asp	Ala	Arg	Leu	Pro		
	1055					1060					1065					
Leu	Lys	Trp	Met	Ala	Pro	Glu	Thr	Ile	Phe	Asp	Arg	Val	Tyr	Thr		
	1070					1075					1080					
Ile	Gln	Ser	Asp	Val	Trp	Ser	Phe	Gly	Val	Leu	Leu	Trp	Glu	Ile		
	1085					1090					1095					
Phe	Ser	Leu	Gly	Ala	Ser	Pro	Tyr	Pro	Gly	Val	Lys	Ile	Asp	Glu		
	1100					1105					1110					

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Glu	Phe	Cys	Arg	Arg	Leu	Lys	Glu	Gly	Thr	Arg	Met	Arg	Ala	Pro
1115						1120					1125			
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1130						1135					1140			
His	Gly	Glu	Pro	Ser	Gln	Arg	Pro	Thr	Phe	Ser	Glu	Leu	Val	Glu
1145						1150					1155			
His	Leu	Gly	Asn	Leu	Leu	Gln	Ala	Asn	Ala	Gln	Gln	Asp	Gly	Lys
1160						1165					1170			
Asp	Tyr	Ile	Val	Leu	Pro	Ile	Ser	Glu	Thr	Leu	Ser	Met	Glu	Glu
1175						1180					1185			
Asp	Ser	Gly	Leu	Ser	Leu	Pro	Thr	Ser	Pro	Val	Ser	Cys	Met	Glu
1190						1195					1200			
Glu	Glu	Glu	Val	Cys	Asp	Pro	Lys	Phe	His	Tyr	Asp	Asn	Thr	Ala
1205						1210					1215			
Gly	Ile	Ser	Gln	Tyr	Leu	Gln	Asn	Ser	Lys	Arg	Lys	Ser	Arg	Pro
1220						1225					1230			
Val	Ser	Val	Lys	Thr	Phe	Glu	Asp	Ile	Pro	Leu	Glu	Glu	Pro	Glu
1235						1240					1245			
Val	Lys	Val	Ile	Pro	Asp	Asp	Asn	Gln	Thr	Asp	Ser	Gly	Met	Val
1250						1255					1260			
Leu	Ala	Ser	Glu	Glu	Leu	Lys	Thr	Leu	Glu	Asp	Arg	Thr	Lys	Leu
1265						1270					1275			
Ser	Pro	Ser	Phe	Gly	Gly	Met	Val	Pro	Ser	Lys	Ser	Arg	Glu	Ser
1280						1285					1290			
Val	Ala	Ser	Glu	Gly	Ser	Asn	Gln	Thr	Ser	Gly	Tyr	Gln	Ser	Gly
1295						1300					1305			
Tyr	His	Ser	Asp	Asp	Thr	Asp	Thr	Thr	Val	Tyr	Ser	Ser	Glu	Glu
1310						1315					1320			
Ala	Glu	Leu	Leu	Lys	Leu	Ile	Glu	Ile	Gly	Val	Gln	Thr	Gly	Ser
1325						1330					1335			
Thr	Ala	Gln	Ile	Leu	Gln	Pro	Asp	Ser	Gly	Thr	Thr	Leu	Ser	Ser
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Pro	Pro	Val												
1355														
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Ser	Leu	Tyr	Asn	Thr	Tyr	Ala	Thr	Leu						
1						5								

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The invention claimed is:

1. A method for treating a disease caused by neovascularization in human choroid, comprising the step of administering to a subject a pharmaceutical composition comprising, as active ingredients, at least one peptide selected from the group consisting of:

- (i) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 2 and 4;
 - (ii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine;
 - (iii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
 - (iv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
 - (v) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan;
 - (vi) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine; and
 - (vii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine, and
- at least one peptide selected from the group consisting of:
- (viii) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 8 and 12; and
 - (ix) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine;
 - (x) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
 - (xi) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
 - (xii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan;
 - (xiii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine; and
 - (xiv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine.

2. The method of claim 1, wherein the disease caused by neovascularization in the choroid is selected from exudative age-related macular degeneration, myopic macular degeneration, angioid streaks, central exudative chorioretinopathy, various retinal pigment epitheliopathy, choroidal atrophy, choroideremia, and choroidal osteoma.

3. The method of claim 1, which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24.

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4. A method of treating a disease caused by neovascularization in human choroid, comprising the step of administering to a subject a vaccine comprising, as active ingredients, at least one peptide selected from the group consisting of:

- (i) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 2 and 4;
- (ii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine;
- (iii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
- (iv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
- (v) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan;
- (vi) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine; and
- (vii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine,

and at least one peptide selected from the group consisting of:

- (viii) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 8 and 12; and
- (ix) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine;
- (x) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
- (xi) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
- (xii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan;
- (xiii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine; and
- (xiv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine.

5. The method of claim 4, wherein the disease caused by neovascularization in the choroid is selected from exudative age-related macular degeneration, myopic macular degeneration, angioid streaks, central exudative chorioretinopathy, various retinal pigment epitheliopathy, choroidal atrophy, choroideremia, and choroidal osteoma.

6. The method of claim 4, which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24.

7. A method for inhibiting neovascularization in human choroid, comprising the step of administering to a subject a

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pharmaceutical composition comprising, as active ingredients, at least one peptide selected from the group consisting of:

- (i) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 2 and 4;
 - (ii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine;
 - (iii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
 - (iv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
 - (v) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan;
 - (vi) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine; and
 - (vii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine, and
- at least one peptide selected from the group consisting of:
- (viii) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 8 and 12; and
 - (ix) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine;
 - (x) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
 - (xi) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
 - (xii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan;
 - (xiii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine; and
 - (xiv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine.

8. The method of claim 7, which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24.

9. A method for inhibiting neovascularization in human choroid, comprising the step of administering to a subject a vaccine comprising, as active ingredients, at least one peptide selected from the group consisting of:

- (i) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 2 and 4,
- (ii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine;

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- (iii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
 - (iv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 2 is modified to methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 2 is modified to valine;
 - (v) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan;
 - (vi) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine; and
 - (vii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 4 is modified to phenylalanine, leucine, tryptophan or methionine, and
- at least one peptide selected from the group consisting of:
- (viii) a peptide consisting of the amino acid sequence selected from the group consisting of SEQ ID NOs: 8 and 12; and
 - (ix) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine;
 - (x) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
 - (xi) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 12 is modified to leucine or methionine and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 12 is modified to valine;
 - (xii) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan;
 - (xiii) a peptide in which the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine; and
 - (xiv) a peptide in which the second amino acid from the N terminus of the amino acid sequence of SEQ ID NO: 8 is modified to tyrosine, methionine or tryptophan and the C-terminal amino acid of the amino acid sequence of SEQ ID NO: 8 is modified to phenylalanine, leucine, tryptophan or methionine.

10. The method of claim 9, which is administered to a subject whose HLA antigen is HLA-A02 or HLA-A24.

11. The method of claim 1, wherein the amount of the peptide selected from the group consisting of (i) to (vii) is 0.1 mg to 10 mg.

12. The method of claim 11, wherein the amount of the peptide selected from the group consisting of (viii) to (xiv) is the same amount as the peptide selected from the group consisting of (i) to (vii).

13. The method of claim 4, wherein the amount of the peptide selected from the group consisting of (i) to (vii) is 0.1 mg to 10 mg.

14. The method of claim 13, wherein the amount of the peptide selected from the group consisting of (viii) to (xiv) is the same amount as the peptide selected from the group consisting of (i) to (vii).

15. The method of claim 4, wherein the vaccine is administered together with an adjuvant.

16. The method of claim 15, wherein the adjuvant is incomplete Freund's adjuvant.

17. The method of claim 7, wherein the amount of the peptide selected from the group consisting of (i) to (vii) is 0.1 mg to 10 mg.

18. The method of claim 17, wherein the amount of the peptide selected from the group consisting of (viii) to (xiv) is the same amount as the peptide selected from the group consisting of (i) to (vii). 5

19. The method of claim 9, wherein the amount of the peptide selected from the group consisting of (i) to (vii) is 0.1 mg to 10 mg. 10

20. The method of claim 19, wherein the amount of the peptide selected from the group consisting of (viii) to (xiv) is the same amount as the peptide selected from the group consisting of (i) to (vii).

21. The method of claim 9, wherein the vaccine is administered together with an adjuvant. 15

22. The method of claim 21, wherein the adjuvant is incomplete Freund's adjuvant.

* * * * *